CITY OF ANDREW

11 East Benton St. P.O. Box 74 Andrew, IA 52030

Phone: (563)672-3570 Email: andrewia@netins.net

ANDREW CITY PARK AND COMMUNITY CENTER RESERVATION FORM

Date of	f the Event:	Start Time:	End Time:
Name:			
Addres	s:		
Primar	y Phone:	Organization/Event:	
Please make out two (2) checks. Make checks payable to the City of Andrew.			
Rental	Fee:		
	550.00 Community Center Rent (cu 525.00 Pavilion Rent 550.00 Pavilion Rent with Electricit 525.00 Pavilion Side Curtains	y and Restrooms	
\$10.00 Community, Church, and licensed non-profit Organization Deposit Fee:			
•	550.00 Damage Fee		
1. 2. 3.	the rent request. I agree that all trash will be proportion to the reserved period. (Including I agree to assume the entire respinjuries to all person, arising out use of the city facilities, and agreemployees from all such claims in to enforce the provisions of this plagree if music is associated with special permission is granted by the	for the date noted above and erly cleaned up and the facility grestrooms, if rented). It consibility and liability for all doof, resulting from or in any made to indemnify and save harm including liable and legal fees a paragraph. In the rental period, it must conthe City Council.	amage of City property and or anner connected with the above less the City, its agents and an disbursements paid or incurred anclude by 11:00 p.m. unless
I have i	read and understand and hereby a	ccept the terms of this contra	ct:
Signature of Renter (or representative for the Organization making the reservation)			
For City		ected: \$ City	/ Official: