

CITY OF ANDREW

11 East Benton St.

P.O. Box 74

Andrew, IA 52030

Phone: (563) 672-3570 Email: andrewcounciltill@gmail.com

ANDREW CITY PARK AND COMMUNITY CENTER RESERVATION FORM

Date of the Event: _____ Start Time: _____ End Time: _____

Name: _____

Address: _____

Primary Phone: _____ Organization/Event: _____

Please make out two (2) checks payable to the City of Andrew and mail them to the address listed above.

Rental Fee:

- _____ \$100.00 Community Center Rental City of Andrew Resident
- _____ \$150.00 Community Center Rental Non-City of Andrew Resident
- _____ \$25.00 Pavilion Rental
- _____ \$50.00 Pavilion Rental with Electricity and Restrooms
- _____ \$25.00 Pavilion Side Curtains
- _____ \$10.00 Community, Church, and licensed non-profit Organization

Deposit Fee:

- _____ \$50.00 Damage Fee

By renting this shelter, the user agrees to the following:

1. I agree to rent the above shelter for the date noted above and have paid the fees associated with the rent request.
2. I agree that all trash will be properly cleaned up and taken with at the end of the event. The facility will be left in the condition prior to the reserved period. (Including restrooms, if rented).
3. I agree to assume the entire responsibility and liability for all damage of City property and or injuries to all person, arising out of, resulting from or in any manner connected with the above use of the city facilities, and agree to indemnify and save harmless the City, its agents and employees from all such claims including liable and legal fees and disbursements paid or incurred to enforce the provisions of this paragraph.
4. I agree if music is associated with the rental period, it must conclude by 11:00 p.m. unless special permission is granted by the City Council.

I have read and understand and hereby accept the terms of this contract:

Signature of Renter (or representative for the Organization making the reservation)

For City Use:

Received on: _____ Rent collected: \$ _____ City Official: _____