



## Bay View Community Room Rental Agreement

Group Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Planned Activity \_\_\_\_\_

Date(s) Requested \_\_\_\_\_

\_\_\_\_\_

Time: From \_\_\_\_\_ To \_\_\_\_\_ Attendance: \_\_\_\_\_

Rental Fee: \$20 per use/per day

Method of Payment:  Cash  Check # \_\_\_\_\_

Credit Card# \_\_\_\_\_ Name on card \_\_\_\_\_

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### **Maximum Capacity: 30 people**

Rental includes the following:

- (8) 6' x 18" classroom tables
- (30) chairs
- (1) Whiteboard/Flipchart and markers

The signature below indicates that the rental applicant has read and agrees to comply with Outpost Natural Foods Community Room rental policies.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_