

Rental Application for the Palacios Pavilion
(please print)

Renter's Information:

Responsible Party: _____

RP Address: _____

RP email address: _____

RP phone number: _____

Date(s) requested: _____

(Please print Day and Date)

Specific hours: _____

Purpose: _____

Is the event private or public? _____

Expected number of attendees: _____

Will alcohol be served: Yes__ No__

Are you an IRS designated non-profit organization? Yes__ No__

Certificate or Designation Letter presented to verify designation _____

By signing this document, I agree to all the terms and conditions in this document.

Renter Signature

Printed Name

Date

FOR PAVILION USE ONLY:

Pavilion Coordinator Signature

Date

Security Deposit: _____ (Check, Cash, Credit Card)

Rental Payment: _____ (Full payment, Partial payment, Check, Cash, Credit Card)

Partial Payment amount	(Check, Cash, Credit Card)	Date
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Partial Payment amount	(Check, Cash, Credit Card)	Date
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Partial Payment amount	(Check, Cash, Credit Card)	Date
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CREDIT CARD ON FILE: (Copy front and back)

COMMENTS: