ALLEGANY COMMUNITY CENTER

GENERAL RENTAL FORM

NAME:_____ PHONE: _____

ALTERNATE CONTACT:_____ PHONE: _____

EMAIL:_____ ORGANIZATION: _____

CITY/STATE:_____ ZIP:_____

DATE OF EVENT: / / **START TIME:** ____:____ **END TIME:** ____:____

TYPE OF FUNCTION:_____ ESTIMATED ATTENDANCE: _____

CHECK STATUS		
☐ Enrolled Seneca	☐ Native ACC Member	☐ Non-Native ACC Member
☐ Non-Profit (501c Form)	☐ SNI Government Department	☐ Fundraiser
☐ Youth Organization	☐ Adult Organization / Team	☐ Seneca Community Organization

ROOMS REQUESTED		
☐ MPR	☐ Gym (1 + 2)	☐ Concession
☐ MPR and Kitchen	☐ Gym 1	☐ ACC Arena
☐ Concourse	☐ Gym 2	☐ Toddler Room
☐ Batting Cages	☐ Outdoor Gazebo	☐
☐ Mezzanine	☐ Indoor Pool	☐

SUPPLIES / MATERIALS NEEDED (IF AVAILABLE):

# of tables: _____ # of chairs: _____

Smart TV: _____ Podium: _____ Other: _____

The undersigned hereby makes application to the Allegany Community Center (ACC) for the use of the above requested facility and certifies that the information on the application is correct. The undersigned acknowledges that the **DEPOSIT** is $_____ and **RENTAL FEE** is $_____. The undersigned agrees to exercise the utmost care in the use of the premises/ property. The applicant agrees to adhere to all rules and regulations pertaining to the use of the facility and to reimburse the Seneca Nation of Indians for any damages arising from the applicant's use of said facility. Any accident involving injury to participants or damages to facilities will be reported to ACC Personnel immediately. I/We further agree to indemnify, defend and hold harmless the SNI, ACC Employees, and volunteers from and against any / all claims, suits, actions or liabilities for injury or death of any person, or loss or damages to property, which arises out of our/ my rental of these facilities. ACC is not responsible for lost or stolen property. I/We also understand that all ACC rules and regulations apply to this rental application.

I/we acknowledge that I/we have received and reviewed the schedule and information in this form.

Name (Print): _____

Signature: _____ Date: _____

PLEASE NOTE: **FULL DEPOSIT** is required to guarantee party booking

*** OFFICE USE ONLY ***

DATE RECEIVED: ___/___/___ **TIME RECEIVED:** _____:_____ **RECEIVED BY:** _____

DEPOSIT PAID: _____ **RECIEPT #:**_____ **FEE PAID:** _____ **RECIEPT #:** _____

CONFIRMED BY: _____

O ENTERED TO CALENDAR by _____

NOTES: