

Pavilion RENTAL AGREEMENT
North Sewickley Township
893 Mercer Road Beaver Falls, PA 15010
724-843-5826

This agreement is entered into this _____ day of _____ **20** by and between THE TOWNSHIP OF NORTH SEWICKLEY, AND Lessee: _____ (Must be at least 18 years of age with photo ID for rental)

Lessee acknowledges that the Township is not responsible or liable for any accident, injury and/or incident that may occur during the pavilion rental by Lessee.

Lessee acknowledges the authorized rental hours are **Dawn to Dusk only**.

Lessee acknowledges that after use of Township facilities, the **Lessee** is responsible for all cleaning of the picnic tables and trash removal. The area is to be left in the same condition it is found. This includes bagging all garbage and placing all bags in the **dumpster beside the police station**.

Lessee acknowledges alcoholic beverages and smoking of any type are **PROHIBITED** on Township property.

Lessee acknowledges the restrooms are located in the **lower level of the Township Building and are NOT handicapped accessible**.

Lessee is responsible for any and all damage that occurs due to use of the facility. The area is to be left in the same state that it is found including the restrooms in the lower level of the Township Building.

Lessee agrees that the cost to use the facility will be **\$25.00, (\$100.00 Non-resident)**, plus a Security Deposit of **\$25.00 (\$100.00 Non-resident)**, to be retained by the Township until inspection of the pavilion to determine it is free of damage and debris. In the event of damage to the premises or debris left or violation of any other term or condition of this Rental Agreement, the Security Deposit shall be forfeited to the Township.

Upon inspection by the Township, Lessee wishes the security deposit check to be:

(please circle one): **SHREDDED** or **MAILED BACK** (to address on check)

Lessee Signature _____

DATE OF FUNCTION: _____ **TYPE OF FUNCTION:** _____

Lessee PRINTED NAME: _____

Lessee ADDRESS: _____

Lessee PHONE NUMBER: _____

START TIME: _____

END TIME: _____

FOR NORTH SEWICKLEY TOWNSHIP USE:

DATE: _____

TWP SIGNATURE: _____

Rental Fee \$ _____ Check #: _____

Security Deposit \$ _____ Check #: _____