Ebbetts Pass Community Center

aka Independence Hall (an All-Volunteer group)

1445 Blagen Rd., P.O. Box 2056 Arnold, CA 95223

Renter/Lessee:	Group Name			
Dates of Event:earlier than 2:00PM check OU	JT by 11:00AM)	(overnight	events: check IN no	
Single day use time: from:	to:			
Special Set Up Arrangements				
	BOOKING INFORMATION t Aid Certified designee.	•		
building, code to trash b	al, the lessee will receive ouilding, P.A. system (if inc contact phone number(s)	dicated) location of		
departure, the deposit was rented area to pre-renta specifically agree to leave cleaning fee to EPCC for	e facility is not found to be invill not be refunded. Any conditions will be deducted the premises in clean and the purpose of having the toe charged. EPCC will de	sts incurred by EPCO ed from the cleaning d neat condition or t premises cleaned. It	C to restore the deposit. Renters to pay a \$200 f the premises are	
fees are paid, and the I	secured until the signed consurance Indemnity formes, and deposits must be role assessed).	n is received by EP0	CC Rental Hall	
RENTAL FEES Seque	oia Room: (\$385) \$	_ Oak Room: (\$150)	\$	
(Per Day): Eff. 1/1/2025	Kitchen: (\$165) \$	Cedar Room: (\$95)	\$	
	Fir Room: (\$95) \$	Pine Room: (\$150)	\$	
TOTAL RENTAL FEES: \$				
Cleaning Fee/Security/Damag	ge deposit: \$200 - Key deposit: \$2	5- P/A deposit: \$50:		
TOTAL FEE DEPOSIT: \$ Fees and Deposits Must be received 10 days prior to event				
TOTAL RENTAL FEE: \$		TOTAL DEPOSIT: \$		

PLEASE MAKE TWO CHECKS, ONE FOR RENTAL FEES AND ONE FOR DEPOSITS PAYABLE TO: EBBETTS PASS COMMUNITY CENTER

MAIL ALL FORMS AND CHECKS TO: EPCC: Attn: Reservations P.O. Box 2056, Arnold, CA 95223

For more information call: Linda VanBerckelaer 209/795-7722 or EPCC: 209/890-7167

Agreement of terms accepted by:	
Renter/Lessee: (print name):	
Signature:	
Address:	
Phone Number:Cell:	
Email:	
EBBETTS PASS COMMUNITY CENTER/INDEPEDENCE HALL COORDINATOR:	
NAME/SIGNATURE:DATE:	
Phone #email:email:	