

WAR MEMORIAL BUILDING RENTAL REQUEST FORM



Commission Chairman: Chris Sims
War Memorial Building
310 Appleton Street
Holyoke, MA 01040
413.322.5631
commissioner@holyoke.org



Please fill out and return to: **War Memorial Building Commission**
310 Appleton Street
Holyoke, MA 01040

NOTE: FEE CHECK AND ALL REQUIRED DOCUMENTS MUST BE AT WAR MEMORIAL BUILDING AT LEAST TWO WEEKS BEFORE EVENT OR YOU MAY NOT HAVE USE OF THE BUILDING.

Must submit request form no less than 60 days from date of Event desired

1. Organization/individual requesting use: _____
Address _____
PH#: _____ Email: _____
2. Type of organization () Profit () Non-profit () other: explain: _____
3. How many are expected to attend? _____
4. Type of activities to be conducted _____
5. Date and times of activities: _____
6. How long will you be using facility? i.e. set-up and rehearsal if needed _____
7. Will alcoholic beverages be sold or used? (Yes) _____ (No) _____
8. Will admission be charged? (Yes) _____ (No) _____ How much? _____
9. Will food or snacks be sold or used? (Yes) _____ (No) _____ Please explain type, amount and location of set-up.

If granted use of this building, you will be responsible for:

- € Use of building for @ \$ _____ per day(s)/event (*amount subject to Commissioners*)
- € Services of Police (must provide signed memorandum of commitment or Invoice from Holyoke PD)
- € Services of a Firefighter (must provide signed memorandum of commitment or Invoice from Holyoke FD)
- € Cleanup of used part of the building
- € Enforcement of "No Smoking" policy
- € Provide a Liability Insurance Rider (*Made out to insure "City of Holyoke"*)
- € Pay for Custodial/janitorial service @\$25.29 per hour (4 hour minimum)

NOTE: War Memorial Building Commission reserves the right to adjust scheduling of facility.

I / We understand and agree to abide by the following rules:

1. Facility is to be used only for the purpose requested and at times requested.
2. There will be no smoking on the premises.
3. The building will be secured and cleared with the custodian before leaving.
4. User will be responsible for any subsequent cleaning or repair costs which result from the use of the building.
5. Children will be supervised at all times.

Special Requirements: _____

The user shall indemnify, defend and hold the War Memorial Building Commissioners and employees harmless from any claim, action, liability or cost, including attorneys' fees or any other costs of defense arising out of the user's use of the building.

Contact Person Signature

Date: _____

*******COMMISSIONER'S USE ONLY*******

Date(s) Requested: _____	Time From: _____
_____	Time To: _____
Time From: _____	Time From: _____
Time To: _____	Time To: _____

Fee Information

Description	No. of Hours	Rate	Total	Payment Information
Custodial Services				<i>Prepayment is Required</i>
Police				
Fire				
Rental Hours				
Other Charges				
				Total Due =

Approved by: _____
Chris Sims/Commission, Chairman

Date: _____