

OWN OF CABOT FACILITY RENTAL USE CONTRACT

Facility Location	Event Date	Contact Name (Herein referred to as USER)
Event Description	Event Hours (include cleanup)	Contact Mailing Address
	Number of Expected Guests	Contact Phone Number

Please answer Yes or No regarding your event:	Yes	No	Additional information you should know:
Will alcohol be consumed?			Consumption of alcohol by persons under age 21 is against the law. In the State of Vermont, only licensed/insured providers may sell or distribute alcoholic beverages.
Will alcohol be sold?			
Will any fireworks/pyrotechnics be used?			Absolutely no pyrotechnics may be used within a Town building. For outdoor activities, permission from the Cabot Fire Dept. is required and must be provided to the Town.
Will decorations be used?			Please review additional contract information below.

RENTAL FEES	Include	Amount
\$100 Refundable Cleaning Deposit	X	\$ 100.00
AUDITORIUM: Max. capacity 225 people		
Daily Use - \$300 per 10-hour day		
Hourly Use - \$50 first hour		
\$25 per hour thereafter – Est. Hours _____		
KITCHEN: \$50 per use		
2nd FLR MEETING ROOM: Max. capacity 50 people		
Daily Use - \$100 per 10-hour day		
Hourly Use - \$50 first hour		
\$25 per hour thereafter – Est. Hours _____		
AUDITORIUM, KITCHEN, AND MEETING ROOM:		
\$400 per 10-hour day		
Hourly Use - \$50 first hour		
\$25 per hour thereafter – Est. Hours _____		
RECREATION FIELD: \$100		
TOTAL FEE	\$	

SIGNATURE REQUIRED BELOW BY THE USER

Full payment of deposit and fees and a signed contract are due two weeks prior to the scheduled event. Fees for long term use of any facility are to be paid on a monthly basis as negotiated by the Town Clerk. Non-profit community events may be scheduled without fee upon approval by the Select Board. **THE SELECTBOARD, TOWN CLERK, OR FACILITY COMMITTEE RESERVE THE RIGHT TO REFUSE RENTAL TO ANY PERSON OR GROUP.**

The USER agrees to provide 1:15 adult supervision for any events involving individuals under 18. No exceptions.

The USER is responsible for cleanup, including sweeping and mopping as necessary all areas accessed by the USER; correct storage of folding chairs and tables; removing all items belonging to the USER; collecting and removing any trash generated by USER; removal of all decorations; locking all doors. Cleanup must be completed within 18 hours of first hour rental time, or before the next scheduled event, whichever occurs first. Cleaning supplies are located in the second-floor storage closet. If the facility is not clean when you arrive, contact Tara at the number below.

No staples, tacks or nails are to be used on any woodwork in the facility. No decorations are to be hung from light fixtures.

The USER is responsible for the lock-up of event facility, including securing all windows and doors. The keys are to be returned to the Town Clerk's Office within 24 hours of first hour rental time.

The USER agrees to inform the Town Clerk of any damage(s) to the facility and hereby agrees to be held liable for any theft, damages, loss, injury, or vandalism of any kind that occurs as a result of the event. **USER agrees to reimburse the Town for damages resulting in repairs or clean-up greater than the \$100 deposit.**

The USER agrees to Fire regulations requiring that stairs and hallways be kept clear from obstruction. All doors must be kept closed at all times.

The USER affirms that all information provided is accurate and further agrees to abide by all rules and conditions of the facility rental use contract.

Contact Betty Ritter @802-426-3757 or 279-1524 with any problems.

A \$100 refundable deposit is required for all facility use. The deposit will be refunded if cleaning and trash removal requirements have been met satisfaction of member(s) of the facility's respective Committee, and the key has been returned to the Town Clerk's Office.

Reservations are on a first come first served basis.

Pets, other than seeing-eye dogs, are not allowed within Town buildings.

SMOKING IN BUILDINGS IS PROHIBITED BY STATE LAW.

I have read the above and agree to all terms:

User Signature _____	Date _____
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FOR CLERK USE ONLY		
\$		
TOTAL RECEIVED	TOWN CLERK / ASSISTANT TOWN CLERK	DATE