6 - Atkinson Community Center
APPLICATION FORM – USE / RENTAL CONTRACT – Effection Effective February 16,2022

Location: E-mail Address Mailing Address	s <u>comm</u>	in Street Atkinson NH rec@atkinson-nh.go ademy Avenue Atkin	<u>v</u>	098		
		Day Mo				e:
Name:			Telepho	ne:		
Address:						
E-mail Address	s:					
Organization:				_Estimate numbe	er of people:	
	BROUGHT IN AN	ID SERVED INDIVIDU		NATED SERVERS V	WITH MASKS AND G	LOVES. WEARING
		NOT ALLOWED INSID		COMMUNITY CNET	ER PREMISES EXC	EPT WHEN
<u>ADHERENCES</u>	TO THE FOLLOW	VING ADDITIONAL TO	WN REQIREMENTS	ARE FOLLOWED.		
Requested roo	m(s) / area (plea	ase check all appropr	riate boxes):			
Ban	iquet Room: < 1 eting Room 1: <	20 people for meetin 12 people M	gs and non-exercise			ams
	1	2	3	4	5	7
Room	Atkinson Town Government & Recreation	Atkinson Community Non-Profit (65%+ Resident)	Atkinson Resident Private	Atkinson Business For - profit	Other Non-Resident Non- Profit	Other Non-Resident Private/ Business
Banquet Includes use of kitchen	N/A	N/A	\$175 < 4 hours \$30/additional hour	\$ <mark>50</mark> / hour or 20% profit	\$50 / hour	\$ <mark>300</mark> < 4 hours \$ <mark>50</mark> additional hou
Kitchen Only	N/A	N/A	\$50 up to 4 hours	\$50 / hour	\$50 / hour	\$50 / hour
Security deposit	N/A	<mark>\$200</mark>	<mark>\$200</mark>	<mark>\$200</mark>	<mark>\$200</mark>	<mark>\$200</mark>
Certificate of Insurance	N/A	YES	NO (YES - if serving alcohol)	YES	YES	NO (YES - if serving alcohol)
		<u> </u>				1
Room 1	N/A	N/A	\$10 / hour	\$ <mark>15</mark> / hour or 20% profit	\$ <mark>15</mark> / hour	\$ <mark>20</mark> / hour
Room 2	N/A	N/A	\$20/hour	\$ <mark>30</mark> / hour or 20% profit	\$ <mark>30</mark> / hour	\$ <mark>40</mark> / hour
Security Deposit	N/A	\$50	\$50	\$50	\$50	\$50
Certificate of	. 1/A	N/A	N1/A	\/F0	\/50	
Insurance AMOUNT DUE	N/A	N/A	N/A	YES	YES	N/A
Upon registration required along Hall rental- Credit Security de	on, 2 separate o with this applica - include set-up a Card (VISA/ MC eposit - Banquet	thecks and a copy of ation form. Please mand clean up time an b/ DIS) / Check / Mon Room \$ 200 / Room b/ DIS) / Check / Mon	ake your checks paya d MAY APPLY COVI ey order # 1 and 2 \$ 50	able to the "Town o	of Atkinson".	·
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SECURITY DEPOSIT: Initial A security deposit is required (check or money order only) \$200 for Banquet Room and \$50 for Room 1, 2, 3 and Kitchen only. This will be held until the event is over and facility has been inspected by an authorized representative and found to be in acceptable condition. The deposit check will be returned or destroyed within 10 days provided all regulations were followed and no additional charges were incurred. Non-profit organizations are encouraged to make donations towards ongoing facility maintenance. The security deposit will be forfeited if the event is canceled within 10 days of the reserved date.
CERTIFICATE OF INSURANCE: Initial Yes No The Town of Atkinson reserves the right to require liability insurance for any event held at the Recreation Facility. A certificate of liability insurance, when required, must be obtained in the amount of \$1,000,000 for each occurrence, with the Town of Atkinson (19 Academy Avenue Atkinson NH 03811) named as an additional insured and must not exclude liquor liability. For events at which alcohol is present a Waiver of Liability must also be provided. The certificate of liability insurance can be obtained from your own insurance company or you can contact EBI (Entertainment Brokers International) and obtain the liability insurance through their TULIP (Tenant Users Liability Insurance Policy) program. Please go to if you are interested in purchasing insurance through the TULIP program.
Alcoholic beverages are NOT allowed in the facility except when adherences to the following town requirements are followed. A paid Police Detail must be arranged by contacting Atkinson Police Department at their non-emergency number (603)362-4001 at least two weeks prior to the event in accordance with RSA 105:9 The police department will assess and determine if a police detail is required. The renter must provide a certificate of liability insurance at least two weeks prior to the event. Please see CERTIFICATE OF INSURANCE section for further details
 CANCELLATION POLICY: Initial There will not be any charge for a cancellation due to the COVID-19 cases and full amount of rental fee will refunded. A full refund will be given if the Atkinson Recreation Department receives a minimum 14 days cancellation notice prior to the event. A 50 percent refund will be returned if the event is cancelled with a 7 to 13 days' notice. No refund if the event is cancelled with less than 7 days' notice. The Atkinson Recreation Department reserves the right to cancel a function at any time, even when in progress, should you, or any of your guests, violate the terms of this agreement. The Atkinson Recreation Department reserves the right to cancel or reschedule any event without notice due to unforeseen emergencies. If the event cannot be rescheduled a full refund will be given.
 FACILITY USAGE: I initial No Smoking is allowed anywhere inside the building per RSA 155:64-77. Smoking is allowed in designated outdoor areas only. Trash is the responsibility of the renter and must be placed in the dumpster provided. The facility shall be left in a clean and orderly condition. Groups using the facility are responsible for setup. Chairs, tables, etc. shall be returned to their original placement. Use of Atkinson Recreation equipment is not allowed without permission. Tacks, pins, nails, staples, glue, duct tape or similar items are not allowed. All decorations including, but not limited to, balloons, streamers, flags, and banners, etc., must be removed at the conclusion of the event. No open flames are allowed except celebratory or ceremonial candles.
PARKING: Initial Please do not block any entries, exits, or gates. Do not park on the roadway in such a manner as to prevent emergency vehicle access.

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	VID-19. PLEASE READ INTIAL AN			e e					
	I understand the CDC	•		•					
	I understand the NH G				al distancing are atrongly				
	I understand that the T recommended regardle		eime – a ia	ice mask, samilize namus, socia	il distancing are strongly				
Intl	<u> </u>		d the Police	e, Selectman or Recreation Co	mmission member find				
IIIU	noncompliance	t will be revoked shoul	u tile i olici	e, delectifian of Necreation Co	IIIIIII33IOII IIIGIIIDGI IIIIU				
Intl	I understand that if the	re are any changes of	the NH Co	vid-19 guidelines and I will con	only any requirement by the				
	Town of Atkinson.	o are arry chariges or	410 1411 00	via 10 galaomiloo aha 1 wiii oon	iply any requirement by the				
	NTERS RESPONSIBILITIES AND V								
1.		r's main door will be unlocked for your reserved time scheduled by the access control system. The door will be the time of your reservation ends. You still be able to exit from inside after the door is locked.							
^									
۷.	Ensure that the space rented is left		condition.	Please fill out the two Check Li	sts on page 3 and return				
2	that page with key after the function All damage, accidents, or injuries, in		d thaft mu	at he reported to Atkinger Deer	raction Department within				
ο.	24 hours.	iciduling varidalism am	u men, mu	st be reported to Atkinson Reci	eation Department within				
4	The renter is responsible for all dan	nages no matter how n	ninor The	Atkinson Recreation Departmen	nt reserves the right to				
••	obtain a quote for repair of damage	•		•	ne rocorvoo ano rigine to				
5.	All doors and windows must be shu				62 degrees at the				
	conclusion of your event.	, 0	•	,	· ·				
ô.	The Center/Recreation Committee	reserve the right to car	ncel or den	the use of the facilities to any	one, at any time, at their				
	discretion. All deposits and fees will	be returned.							
7.	The Town of Atkinson and/or the Ro		is not respo	onsible for personal property/m	oney or for the safety of				
_	any property brought onto the prem								
8.	After your function – make sure to s				ors then drop the key(s) in				
^	the Center's key drop by the office								
9.	The renter shall save and hold the								
	harmless for any and all injuries, da of the premises occupied by the rer				perations, and ansing out				
	ave read the above contract and a	-		-	_				
ten	tative-subject to cancellation by t	ne center/committee,	until this	contract is signed and receiv	red by the center.				
С	ustomer Signature	Date	Comm	unity Center Representative	 Date				
	ū		NI a mila	. Vaabida Tuuruun					
			INOTIK	o Yoshida-Travers					
Cu	stomer name -print								
		FOR OFI	FICE USE	ONLY					
REI	NTAL FEE RECEIVED: DATE:	AMOUN ⁷	Γ: \$	CHECK #					
	POSIT FFF RECEIVED: DATE:								

SPECIAL INSTRUCTIONS:

[Type text]

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Please see page 6 for Customer check list

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CUSTOMERS' CHECK LISTS - Return completed form after the rental.

Check						
For evenings and weekends rentals - No need to have key for the door. The center's main						
entrance door will be open at your reserved time scheduled by the access control system.						
he floor.						
supplies and neat before						
new trash liners.						
e kitchen cabinet.						
t responsible for any items						
report any damages,						
person(s) named on the						
iled by the access control						
, but will not be renter. So						
ve.						
Check						
or you will be charged						
Please scrape all grease, food scraps & coffee grounds into the trash barrel. Clean what you used - ovens, stove, griddle, microwave.						
chairs used:						
chairs used:and denial of future requests to use						
chairs used:						
chairs used: and denial of future requests to use to all who share this building. Thank						
chairs used:and denial of future requests to use						
chairs used: and denial of future requests to use to all who share this building. Thank						
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chairs used: and denial of future requests to use to all who share this building. Thank nt go through list and check off. Please						
chairs used: and denial of future requests to use to all who share this building. Thank nt go through list and check off. Please						