



12803 S. Wacousta Rd. Grand Ledge MI 48837 p(517) 626-6593*207

GYM RENTAL APPLICATION

The Wallace F. Watt Community Center (gym) sits just behind the Township Hall. The air-conditioned facility has a maximum occupancy of 125. The main floor of the gym is 40' x 60'. There are two basketball hoops (short court) and shuffleboard area. Rectangular tables (8') and metal folding chairs are available. The kitchen has a microwave, refrigerator, two stoves, commercial sink, garbage disposal, food prep area, and additional outlets. The facility, including restrooms, is handicap accessible.

Name and Address _____

Phone _____ Function Date _____ Group Size _____

Damage Deposit \$150.00

Damage Deposit with alcohol (special permit and insurance required) \$300.00

DEPOSIT REFUNDED VIA CHECK MAILED TO ADDRESS OF RESPONSIBLE RENTER ABOVE APPROXIMATELY 4-6 WEEKS AFTER EVENT

Partial Day (Sunday-Friday) \$85.00 8am-4pm or 4pm-midnight

Full Day (Saturday is **always** a full day) \$210.00 8am-midnight

Hourly Rate-Sports Only \$20 first hour and \$10 additional hour maximum 2 hours

****If you are not a resident of Watertown Township there is an additional \$50 nonrefundable fee.**

A deposit must be made at the time reservation is made to hold the rental. Full payment of rental fee MUST be made at least 1 week proper to event. A reservation will not be considered final until payment is made in full. 2 weeks' notice must be given to receive a refund. A key to the gym must be picked up the open business day before the rental and returned immediately after rental to the township dropbox at the front of the township hall.

I hereby agree to assume responsibility for all damage or liability of any kind and to save harmless and indemnify Watertown Charter Township from any liability, expense, or cost in connection with the use of Township facilities covered under this application.

I hereby agree to assume responsibility for any and all thefts of Watertown Charter Township property damage thereto, and to reimburse the Township based upon replacement cost for and such theft or damage within 30 days after such a theft or damage occurs.

I have read this application and the facility rates and rules, and if this application is approved, I do hereby agree to comply with all such conditions.

Signature _____ Date _____

Office use only-Amount Paid _____ Amount Due _____

Deposits will only be refunded to responsible renter above.