



# Falstaff Family Centre

## 2024

### Rental Application Form

**Falstaff Family Centre**

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# Falstaff Family Centre

## Falstaff Family Centre Fee For Service Rental Application

**Rental Application Note:** Before completing the form, please read the attached Rental Terms and Conditions. Submit Application along with Certificate of Insurance. Confirmation of application will be made by a FFC representative.

**ORGANIZATION:** \_\_\_\_\_

**CONTACT INFORMATION:**

**NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

\_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**TYPE OF EVENT/ACTIVITY:** \_\_\_\_\_

**ROOM:**  Community Room  Kitchen  Grounds  Basement Classroom

**DATE(S) REQUESTED:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TIME(S) REQUESTED:**

**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_  
**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_  
**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**ANTICIPATED #:** ADULTS: \_\_\_\_\_ CHILDREN: \_\_\_\_\_

**WILL THE EVENT REQUIRE HANDICAPPED ACCESS?**  YES  NO

**Do you have insurance for the duration of the agreement?**  YES  NO Please submit one week prior to event

**Do you require a Liquor License?**  YES  NO Please submit one week prior to event

**REQUIRED #:** TABLES: \_\_\_\_\_ CHAIRS: \_\_\_\_\_ AUDIO/VIDEO: \_\_\_\_\_ PIANO: \_\_\_\_\_

**Payment:** Invoices will be billed monthly at the beginning of each month and are due upon receipt

I, the Applicant(s), have read the Policies Terms and Conditions under which this Rental application is being made and I hereby accept full responsibility for the obligations stated therein.

SIGNATURE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

APPLICANT: \_\_\_\_\_

STAFF

THE FALSTAFF FAMILY CENTRE

DATE: \_\_\_\_\_

DATE

Information collected of this application form is collected by the Falstaff Family Centre and will be used by the Centre to review and process applications for rental of space in the Falstaff Family Centre. The Falstaff Family Centre reserves the right to refuse any rental application.