

Fort Gratiot Pointe Community Center

5085 Lakeshore Road, Fort Gratiot, Michigan 48059

Rental Application and Agreement

Mail or Return to:

Fort Gratiot Charter Township
3720 Keewahdin Road
Fort Gratiot, Michigan 48059

Date: _____

Person/Organization applying for use: _____

Address (C/S/Z): _____

Phone Number: _____

Driver's License/ ID # or Other Proof of Residency: _____

Type of Use: **Meeting only.** Meeting Only. Light refreshments only, no kitchen use. i.e. civic group, neighborhood association, church, senior organization
Check One, Rates Vary by Use/User: **Party.** Food served. i.e., reception, shower, reunion, graduation, birthday, communion, retirement, wake or like function.

Food Served: Yes No The Sale and/or Consumption of Alcoholic Beverages is PROHIBITED

Event Date: _____ **Time to Open:** _____ **Time to Close:** _____

PLEASE CALL TO CONFIRM TIME 10 DAYS PRIOR TO EVENT

*6 hour block included in rental fee. \$50 for Additional 4 hour block. Close time no later than 10 PM. See Policies and Rules for more details.

INDEMNITY BY APPLICANT

The Applicant acknowledges receipt of a copy of the Policies and Rules and agrees to comply. Failure to comply with the Policies and Rules, shall result in forfeiture of entire deposit.

Applicant shall indemnify the Township and save it harmless from and against any and all claims, actions, damages, liability and expense in connection with loss of life, personal injury and/or damage to property arising from or out of the occupancy or use by Applicant of the premises or any part of the Township property occasional, wholly or in part, by any act or omission of Applicant, its agents, contractors or employees.

I, hereby, agree to the foregoing terms and conditions of this agreement.

SIGNATURE OF APPLICANT

DATE

Please Do Not Write Below This Line ~ Office Use Only

	PROPERTY OWNER/ RESIDENT RATE		NON-PROPERTY OWNER/ NON-RESIDENT RATE		DATE PAID
	Meeting	Party	Meeting	Party	
Use Type:					
Deposit:	50.00	100.00	50.00	100.00	
Rental Fee:	50.00	100.00	100.00	200.00	
*Extra 4 Hours:	50.00	50.00	50.00	50.00	
TOTAL DUE:					