

Please sign and return with your DEPOSIT and PAYMENT IN FULL to confirm your reservation.

<b>Renter Name:</b>		<b>Today's Date:</b>	
<b>Telephone:</b>			
<b>Email:</b>		<b>Residency:</b>	<input type="checkbox"/> Willoughby Hills Resident*
<b>pAddress:</b>			<input type="checkbox"/> Non-Resident
			*Valid ID required with Willoughby Hills address
		OFFICE USE: <input type="checkbox"/> ID <input type="checkbox"/> PAYMENT <input type="checkbox"/> INIT. POLICIES <input type="checkbox"/> LAYOUT	

\*Please Note: Renter listed above **MUST** be present for the entirety of the event and is responsible for the room.

Date of Event	Start Time	End Time	Number of Guests (Max. 100)	Room Rate (6 hours)		Total
				<b>Mon-Thurs</b>	Willoughby Hills Resident: \$200 Non-Resident: \$300	
				<b>Fri-Sun</b>	Willoughby Hills Resident: \$300 Non-Resident: \$400	
				Additional hours:		X \$40
				<b>Security Deposit</b>		
					Willoughby Hills Resident: \$400 Non-Resident: \$400	\$400.00
				<b>Total Due at Signing:</b>		

**Community Center Rental Hours**

Monday through Thursday: 9:00AM – 9:00PM  
 Friday & Saturday 10:00AM – 11:00PM  
 Sunday 10:00AM – 6:00PM

**Willoughby Hills Community Center**

35400 Chardon Road  
 Willoughby Hills, OH 44094

Email: communitycenter@willoughbyhills-oh.gov  
 Phone: (440) 470-0881

Cash  Check  Money Order  Credit Card

Make Check or Money Order payable to: **City of Willoughby Hills**

The six (6) hour rental rate **includes set up and clean up**. You must be prepared to vacate the premises at end time stated above, failure to do so will result in forfeiture of your security deposit. Additional hours may be purchased prior to event if necessary (see above).

<b>Event Type</b> (i.e. birthday, graduation, etc.)	
<b>Welcome/Directional sign for guests:</b>	

By signing this agreement, the contract holder assumes full liability and shall forever hold harmless the City of Willoughby Hills, all of its employees, agents, representatives for any injury, illness or death to any person or persons associated with use of this facility. By signing this agreement, the contract holder assumes full liability for damages to persons or property either private or public.

**I have read and agree to all of the above, and to the terms of the attached Willoughby Hills Community Center Rental Rates and Policies.**

<b>Signature of renter</b>		<b>Date:</b>	
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For more information, visit: [www.whcommunitycenter.com](http://www.whcommunitycenter.com)

Resident Only 4-hour Repass \$100.00