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

Renter Name:					Today's Date:					
Telephone:										
Email:					Residency: Willoughby Hills Resident*					
Address:					□ Non-Resident					
					*Valid ID required with Willoughby Hills address					
					OFFICE USE:   ID   PAYMENT   INIT. POLICIES   LAYOUT					
*Dlagge No	ta. Dantar liata	ad above MUC	The present	fou the c						
Please No	te: Renter liste	ed above MUS	T be present	ior the e	entirety of t	ine event and	i is respon	isible for th	ie room.	
Date of Event	Start Time	End Time	Number of Guests (Max. 100)		Rooi	m Rate (6 h	Rate (6 hours)			
				Mon-Thurs		Willoughby	Willoughby Hills Resident: \$200 Non-Resident: \$300			
Community Center Rental Hours				Fri	Fri-Sun W		by Hills Resident: \$300 Non-Resident: \$400			
Monday through Thursday: 9:00AM				Additio		tional hours:		X \$40		
Friday & Saturday 9:00AM – Sunday 9:00AM -					Security Dep					
Willough	nter	Willoughby			Hills Resid Non-Resid		\$400.00			
Wi				Tota	al Due at S	Signing:				
Email: comm	-oh.gov	☐ Cash ☐ Check ☐ Money Order ☐ Credit Card				dit Card				
	Make Check or Money Order payable to: City of Willoughby									
The six (6) hour failure to do so will				ou must b	e prepared	to vacate the	premises at	end time s	tated above,	
Event Type (i.e. b										
Welcome/Directional sign for guests:										
By signing this as Willoughby Hills, persons associate for damages to p	greement, the all of its emp ted with use o ersons or pro	e contract ho ployees, ager of this facility. operty either	nts, represen By signing t private or pu	itatives this agr iblic.	for any in eement, t	njury, illness :he contract	or death holder as	to any pe ssumes fu	erson or ull liability	
Center Rental R										
Signature of ren	ter					Date:				
For more information, visit our website: www.whcommunitycenter.com							Resident Only Repass \$75.00			