

Application

Security Deposit

Certificate

Payment \$ \_\_\_\_\_



Community Room Non Profit Application

To request a reservation for the community room, please complete and submit the form below to:

500 S. Fish Lake Road, Volo, IL 60073 or Email: dlemay@villageofvolo.com Village of Volo: 847-740-6982

Group Name: \_\_\_\_\_ Type of Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Brief Description of the Nature of the Event: \_\_\_\_\_

Total Estimated Attendance: \_\_\_\_\_ Number of Children: \_\_\_\_\_ Number of Adults: \_\_\_\_\_

Frequency of Usage: One time only Weekly Bi Weekly Monthly Other: \_\_\_\_\_

Date(s) being requested: \_\_\_\_\_

When requesting rental times, please be sure to include adequate time for your group's setup and cleanup.

Rental Start time: \_\_\_\_\_ Rental Finish Time: \_\_\_\_\_

Please circle the applicable answers: Will your rental require use of the warming kitchen? Yes No Will food and/or beverages be served? Yes No Will Village tables and/or chairs be used? Yes No

Initials:

- By completing this application, the applicant agrees that they have read and will abide by the Village of Volo Community Room Rules & Regulations. The applicant agrees to indemnify, hold harmless, and defend the Village of Volo from and against any and all personal injuries and/or loss of personal property sustained by the applicant's attendees arising out of the facility use applied for under the Village of Volo Community Room Usage Policy. The applicant agrees to provide a Certificate of Insurance naming the Village of Volo additionally insured covering any date(s) requested. The applicant agrees to pay \$10 per scheduled event. Please Note: The fee will need to be paid in advance to hold the date and times for the event. A security deposit is required annually in the amount of no less than \$100.00. The deposit may be increased as the Village determines in its sole discretion. The Community Room must be left clean and in good condition. All waste must be disposed of properly. All tables/chairs used need to be replaced on the storage racks at the end of the event Failure to leave the facility in proper order will result in denial of future requests to use the room and further, the Village shall have the right to retain any portion or all of the security deposit. Please return the deposit information sheet with this application. No member of the village staff will be available outside of normal business hours for event support. The key for access to the community room can be picked up the day of the event or business day prior (weekend events) and returned directly after rental completion. Please call the Village Hall at least 48 hours prior to event/meeting to reschedule with no additional fees. Applications for reservations are accepted annually from April 1st - April 30th. An application does not guarantee approval of requests and dates can be added throughout the year at first come first serve. Fees are subject to change without notice. The Village of Volo reserves the right to terminate this agreement at any time or to reassign space without notice.

Signature \_\_\_\_\_

Date \_\_\_\_\_



Deposit Information Sheet

Group Name: \_\_\_\_\_ Type of Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

A security deposit is required for all community room rentals at the Village of Volo. Groups that use the room on a consistent basis can have the Village keep their deposit over the period of time that the room is used.

The Community Room must be left clean and in good condition. All waste must be disposed of properly. Failure to leave the facility in proper order will result in denial of future requests to use the room and further, the Village shall have the right to retain any portion or all of the security deposit.

Please return this deposit information sheet with this application. If dates are approved, the reservation is considered temporary until a security deposit is made and any fees are paid. The deposit may be increased as the Village determines in its sole discretion.

**CREDIT CARD:** Failure to leave the facility in proper order will result in the deposit being charged upon inspection of the premises.

Address of Card Holder: \_\_\_\_\_

Phone Number of Card Holder: \_\_\_\_\_

Name Printed on Card: \_\_\_\_\_ Amount: \$ 250.00

Card Type:  VISA  MASTERCARD  DISCOVER

16 Digit Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_ / \_\_\_\_ CVV (3 Digit number on back of Visa/MC): \_\_\_\_

Card Holder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby authorize The Village of Volo to process the above credit card for the full payment of the deposit against any damages and/or charges incurred by the Village in association with the renting and use of the Community Room. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction does not exceed the agreed upon amount listed above. I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the Village of Volo in writing of any changes to my account information or termination of the account while this deposit remains in effect.

Office use only:

Date CHARGED: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Date of Violation: \_\_\_\_\_

Description of damages and/or charges incurred: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Refund Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Check # \_\_\_\_\_