



John D. Hunter, Mayor & Safety Service Director
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"THE HEART OF LORAIN COUNTY"
Monday – Friday 8am – 4pm

SHEFFIELD VILLAGE COMMUNITY ROOM RENTAL AGREEMENT

Name _____

Address _____

City State Zip _____ Telephone # _____

	YES	NO	What type of event are you planning?
Resident	<input type="checkbox"/>	<input type="checkbox"/>	_____
Employee	<input type="checkbox"/>	<input type="checkbox"/>	

Payment Cash _____ Check _____ # _____

Deposit in advance Cash _____ Check _____ # _____

Date Requested: _____ Time Requested: from _____ to _____

DO NOT MOVE THE LARGE WOODEN TABLE DUE TO ITS AGE, SIZE, AND WEIGHT.

I hereby undertake to indemnify and save harmless the Village of Sheffield from any and all liability and damages it may suffer as a result of claims, demands, costs, or judgments against it arising out of the uses stated in this Agreement.

I understand that the event is being videotaped and under surveillance at all times by the Police Department to ensure all actions and activities are documented.

Any damage over the \$100 deposit will be billed and required to be paid by the renter (i.e. spills on carpet requiring carpet cleaning, damage to wall or furniture, etc.)

**I have reviewed this agreement and agree to all terms listed above.
I've read & received Sheffield Village Community Room Rules & Regulations.**

Signature Date Confirmed by Sheffield Village Staff Member Date