Village Of Glen Ellyn
Glen Ellyn Civic Center
535 Duane Street
Glen Ellyn, IL 60137

Name of Group: _____

Contact/User Name: _____

Contact Address: _____

Telephone #: Home: ( ) _____ **Work:** ( ) _____ Cell: ( ) _____

E-mail: _____

User(s) acknowledge(s) they have read and understand the Glen Ellyn Civic Center Rules and Regulations.

User(s) agree(s) to indemnify and hold harmless the Village of Glen Ellyn, its agents and employees from and against any and all loss or liability of any nature relating to the use of the Civic Center including, but not limited to, injury or death of any persons, damage or destruction of property, including loss of use thereof.

User(s) agree(s) that the Village of Glen Ellyn and its agents and employees assume no liability whatsoever relating to the use of the facilities or the cancellation by the Village of the planned use of the facilities.

User(s) acknowledge(s) that the Village of Glen Ellyn may require user(s) to provide evidence of insurance in an amount and types sufficient to satisfy the needs of the Village and listing the Village as an additional insured.

User(s) acknowledge(s) receipt and understanding of the Glen Ellyn Civic Center Rules and Regulations and agrees that user(s) and all those attending the function shall abide by and be bound by the same.

User(s) agree(s) to notify the Village of Glen Ellyn Administration Department a minimum of twenty-four (24) hours in advance if the facilities will not be used on the date(s) reserved or be charged a cancellation fee of a minimum of $10.

User(s) agree(s) and understand(s) that the Village of Glen Ellyn may cancel this agreement for any reason and will attempt to give at least twenty-four (24) hours advance notice. In addition, it may be necessary to preempt the use of the Civic Center for use by the Village of Glen Ellyn.

Category ~~2~~, 3 and 4 user(s) are required to post a $100.00 security deposit, which is refundable, and pay for user scheduling and equipment rental fees, as necessary, with this contract to schedule the date(s) requested. Checks should be made payable to the Village of Glen Ellyn. Credit cards are only accepted if paying in person.

User(s) understand(s) custodians will set up the room according to the diagram on the reverse side of this document. Changes to the set up will be made in advance of the scheduled meeting by calling 630/469-5000.

Signature of User: _____

For Contract Year: **SEPTEMBER 3, 2013 through AUGUST 15, 2014**

Name of Group: _____

Contact Name:_____

Proposed Use: _____

##

Hours: From: _____(AM/PM) To: _____(AM/PM).

Room Arrangement Diagram:

Requested Dates:
(Please Give Exact Dates
Ex. 10/17/13, 1/28/14)

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
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_____
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_____
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_____
_____
_____

Equipment Needed

Number of Chairs _____ Number of Card Tables_____ Screen _____ Other _____

Number of Large Tables _____ Public Address/Sound System _____ TV/VCR/DVD _____

##

FOR OFFICE USE ONLY

Contract Received: Date:_____ By:_____

Category Assignment: _____ Deposit Received: Date:_____

Copy of Contract Returned: Date:_____ Deposit Returned: Date:_____

Facilities Superintendent Copied:_____ Charges for Use: $_____

Room Assignment:_____**(This assignment is preliminary. Please verify on schedule located in the Civic Center)**

TEAM ROSTER*

List names and addresses of all players and coaches below:

Name Address

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____
18. _____
19. _____
20. _____
21. _____
22. _____
23. _____
24. _____
25. _____
26. _____
27. _____
28. _____
29. _____
30. _____

* Failure to include this roster when submitting your room rental agreement will cause delay in processing your request.