

**MARRIOTT-SLATERVILLE CITY
CITY HALL RESERVATION AGREEMENT**

Name or Organization: _____

Address: _____ City: _____

Contact Person: _____ Phone: _____

Proposed Use of Facilities: _____

Date Rented: _____ Day of Week: _____

PARTIES AND OTHER ACTIVITIES:

- Multi-purpose Room Resident \$ 75.00
- Non-Profit Must Show Form: #501C3.

WEDDINGS:

- Multi-purpose Room Resident \$ 175.00
- Municipal Gardens Resident \$ 200.00

Refundable Deposit \$100.00

MEETINGS:

- Library Resident \$ 25.00
- Multi-purpose Room Resident \$ 50.00
- Non-Profit Must Show Form: #501C3.

Times utilizing Facility: From: _____ **To:** _____

Doors will be open at the **EXACT TIMES** listed above. **MARRIOTT-SLATERVILLE CITY REQUIRES THE RESPONSIBLE PERSON TO REMAIN AT THE FACILITY DURING THE HOURS LISTED.**

By signing below I agree to the condition of Marriott-Slaterville City Policies. I understand that failure to abide by this Agreement may result in the loss of rental privileges in the future. I understand that the City assumes no responsibility or liability for losses, claims, accidents, or injuries arising from my activity or my reservation at this facility.

Signature of Responsible Party: _____ Date _____

FOR EMERGENCIES PLEASE CALL: 801-791-4997