

VILLAGE OF NEW AUBURN

130 E Elm St | PO Box 100 | New Auburn, WI 54757 | 715-237-2223

Parks Pavilion Rental Agreement & Checklist

Pavilion Renter Name		Date of Application	
Address		Phone	
Alternate Contact		Responsible Party	
Phone		Phone	
Are you a Non-Profit Organization? <input type="checkbox"/> YES <input type="checkbox"/> NO		If Yes, Name of Non-Profit Organization	
Rental Date		Please supply a copy of your EIN Non-Profit License	
Time of Event	Expected End Time	FOR VILLAGE STAFF ONLY Field Lights Metering Start _____ End _____	
Rental For			
Item	Areas of Use Mark with ✓	Item	Returned
1. Kitchen			
2. Tables			
3. Chairs			
4. Open Area			
5. Floors			
6. Bathrooms			
7. Grounds			
8. Cooler			
9. Refrigerator			
10. Field Lights			
11. Extension Cords			
12. Other		Noted Damages To:	
<p>The New Auburn Village and Parks Commission is not responsible for any injuries or accidents incurred while renting the building. The Renter is responsible for all damages incurred while using the building and removal of all garbage. If the garbage is not removed, a fee of \$25 will be deducted from your security deposit. Reservations are pending due to availability; confirmation will be made 90 days before the reservation date. Water at pavilion is shut off between October and April annually. Please report any problems to the Parks Commission at 715-237-2223.</p>			
Renters Signature		Date	
Alternate Renter's Signature		Date	
FOR VILLAGE STAFF ONLY			
Date Application Received / /	Rental Fee <input type="checkbox"/> \$150 Non-Profit Organization <input type="checkbox"/> \$65 <i>(Must submit EIN Form if Non-Profit)</i>	Method of Payment <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Check # _____	Inspected By <input type="checkbox"/> DM <input type="checkbox"/> JB <input type="checkbox"/> Park Member: _____
Informed Renter of: <input type="checkbox"/> Keys - # _____ <input type="checkbox"/> Garbage/Dump Usage	Deposit Fee <input type="checkbox"/> \$150 <i>(Returned if garbage is removed, no damages, and cleaned)</i>	Method of Payment <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Check # _____	Deposit Fee <input type="checkbox"/> Returned <input type="checkbox"/> Deposited Date: _____