

Facility Rental Application

Name/Organization	_____		
Address	_____		
Phone	_____	Cell	_____
Facility	_____		
Email	_____		
Date of Event	_____	Type of Event	_____
Expected Attendance	_____		
Time/Duration	_____		

No smoking in Grey Highlands Facilities – Max Fine \$5,000.00

Not all facilities equipped with air conditioning

Alcohol served? ☐ Yes ☐ No

(If yes, attach copy of Special Occasions Permit and Appendix B of the Municipal Alcohol Policy)

High risk events may require deposits at the discretion of the Municipality of Grey Highlands staff. ***

By signing this application, you acknowledge that you have had ample opportunity to consider, understand and agree to the terms and conditions contained herein, in addition to the Rental of Municipal Facility Policy.

Applicant's Signature _____ Date _____

Office Use Only

Facility	_____	Cost	_____
Additional Fees	_____	Cost	_____
Additional Fees	_____	Cost	_____
Additional Fees	_____	Cost	_____
Additional Fees	_____	Cost	_____
		Total Cost	_____

Deposit Made Date Paid _____
Balance Owing Date Paid _____

Damage Deposit Received _____
Cheque Number _____
Return Date _____

Signed copy of the Municipal Alcohol Policy Received On: _____
Copy of Smart Serve Bartenders Received On (Alcohol Events): _____
Copy of Special Occasions Permit Received On (Alcohol Events): _____
Proof of Security Received On (Buck and Doe Only): _____
Proof of Insurance Received On (Alcohol/High Risk Events): _____

***Security deposit in cheque or cash form, of \$282.50 required for **ALL** events, seperately from payment of invoice. Returned upon successful post event inspection for damage.