



**City of Woodland
Facility Rental & Use Agreement**

Facility Usage Date: _____
** Facility Requested: _____
Arrival Time: _____
Departure Time: _____
Gate Down? (HSL Only): _____

Horseshoe Covered Area

City of Woodland Resident* \$95 (includes \$50 deposit)
Non-Resident \$160 (includes \$50 deposit)
Recognized Non-Profit \$75 (includes \$50 deposit)

Community Center

City of Woodland Resident* \$220 (includes \$150 deposit)
Non-Resident \$260 (includes \$150 deposit)
Recognized Non-Profit \$175 (includes \$150 deposit)

**persons who reside within city limits
**Please call our office at 225-8281 for information about other city meeting rooms*

Applicant Name: _____

Organization (if applicable): _____

Mailing Address: _____

Phone Number: _____ Number People Attending Event: _____

Email Address: _____ Event Type: _____

Please read the following carefully:

- Enter and vacate at the time stated above (*All facilities close at 10:00 pm*)
- Use facility listed on application
- NO alcohol use allowed on City property
- 24 hour cancellation notice is required
- NO tobacco use or smoking in or within 25 feet of buildings
- Adult supervision is required at ALL TIMES
- User is responsible for clean-up and damages
- Any emergency situation or bad weather may cause cancellation of the facilities without notification
- Failure to observe rules and regulations of the City may result in loss of usage privileges and forfeiture of deposit

Notice: Deposits will be non refundable if the key is not returned, a city employee is called out to unlock, clean up, etc. Report any damages or problems to City Hall Annex 360-225-8281, as soon as possible. If the problem occurs after hours, please call 360-608-8722.

Agreement: The undersigned hereby makes application to the City of Woodland for use of city facilities described above and certifies that the information given in this application is correct. The undersigned further states that he/she has the authority to make this application for the applicant and agrees that the applicant will observe all rules and regulations of Woodland Municipal Code and policies of the city in which the facilities are requested. Applicant agrees that City of Woodland and City of Woodland agents, employees, and directors shall not be liable for any damage to person or property by reason of the negligent acts of the Applicant, its agents, employees, invitees, or subcontractors. Applicant agrees to protect indemnify for costs, legal and other expenses, and hold harmless City of Woodland and its officers, employees, directors, and agents from claims, liabilities, or suits arising out of injury to person or property from negligent acts of the Applicant, its agent, employees, invitees, or subcontractors.

Signature: _____ Date: _____

For Office Use Only		
Receipt Number: _____	Key Color: _____	Refund Check #: _____
CA/CK/E Payment: _____	Date Checked Out: _____	Date Refunded: _____
Amount Paid: _____	Date Returned: _____	Reservation #: _____
Balance Due: _____		