



CITY OF NEW BALTIMORE

Department of Parks and Recreation

50976 Washington St. New Baltimore, MI 48047 586-725-0291 FAX: 586-725-7484

New Baltimore Recreation Center Facility Request

Per 2Hr Block Time

\$50/\$50 Dep. -Res/NR Non-Profit

\$25/\$50 Dep. -Res-Non-Profit

\$75/\$50 Dep. -Non-Res

Office Use Only

Date: _____

Deposit: _____

Rental: _____

Day: _____ Date: _____ Start Time: _____ End Time: _____

(Equipment Needed) Tables: _____ Chairs: _____

Purpose of Usage: _____ Number of Users: _____

NO alcoholic beverages are permitted inside or on the building grounds.

I/We, the undersigned, agree to reimburse the City of New Baltimore for the cost of any damage (s) incurred to the Recreation Center and/or equipment during the use of the facility during the date and time above. I/We state without reservation that the facilities will be used only for the purpose specified above.

Applicant's Name & Address (Please Print)

Applicant/Group Name: _____ E-Mail: _____

Address _____ City: _____ State: _____ Zip Code: _____

Signature of Applicant: _____ Phone# _____ Date: _____

Alternate Contact Person: _____ Phone# _____ Date: _____

A copy of this Form **MUST** be turned in to the Recreation Department office, **before** the time of building usage. Failure to do so may result in cancellation of usage.

*****Building capacity is 160 occupants, it is the responsibility of the person signing this request to monitor and enforce this limitation*****

Permit Approved: _____ Date: _____

Staff Member/ Parks & Recreation Director

Office Use Only

Condition of Facility:

Clean? Yes _____ No _____ Damage? Yes _____ No _____ Return Deposit? Yes _____ No _____

Signed _____ Date: _____ Deposit Amount: \$ _____

Parks and Recreation Director