

**QUESTIONS:**

call 316-799-2445

or email to:

cityclerk@whitewaterks.gov

SUBMIT FORM TO:

the City Office

or email to:

cityclerk@whitewaterks.gov

SCOUT HOUSE RENTAL AGREEMENT FORM**CONTACT INFORMATION**

Name of Renter/Organization: _____

Contact Person(s): _____

Phone Number: _____ Email Address: _____

Mailing Address: _____ (for reimbursement)

RENTAL DETAILS

Date(s) of Rental: _____ Start Time: _____ End Time: _____

Purpose of Rental/Event Description: _____ Expected Attendance: _____

RENTAL FEES

Rental Rate: \$75 per day

Deposit Amount: \$25 (refundable if no damages)

Total Amount Due: \$100 (one day)

Payment Method: Cash Check Credit Card Other: _____**FACILITY USE TERMS**

Please read and initial each item:

- I will return the key to the city office located @ 201 S. Elm.
- I agree to leave the facility clean and in good condition.
- I understand I am responsible for any damages.
- I will ensure all activities comply with local laws and Scout House rules.
- I will not exceed the maximum occupancy limit.
- I will not use open flames or hazardous materials.

LIABILITY

The Scout House and its representatives are not liable for injuries or lost/stolen items.

SIGNATURES

By signing below, I agree to the terms and conditions of this rental agreement.

Renter's Signature: _____ Date: _____

Scout House Representative: _____ Date: _____