TOWN OF ST. GERMAIN FACILITY USAGE AGREEMENT

(As provided for in Code of Ordinances — Chapter 17 – Community Parks & Buildings Usage)

Form revised 02/27/2024

Facility Requested		
Com. Center Gym (without use of kitchen)	Chamber of Commerce Shelter Ball Field (north)	
Com. Center Gym (with use of kitchen)	Large Pavilion (without use of kitchen) Ball Field (south)	
Com. Center Room #2	Large Pavilion (with use of kitchen) Vandervort Park	
Com. Center Room #3	Small Pavilion (no kitchen) Fitness Room	
Com. Center Room #6	Soccer Field (north of cemetery) Key Fob (single use)	
Key Fob	Fern Ridge Pavilion	
Start date:am / pm End date	:am / pm Purpose	
Facility Usage Requested By		
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Name Address	City, State, Zip	_
		\neg
Email	Organization	_
Driver license #	Phone	
User Agreement The assigned security Code/Fob is your responsibility. DO NOT share this Code/Fob with anyone. You must use your Code/Fob to enter the building and you may also be required to use it to lock the building upon your departure. You may be held responsible for any unauthorized use or damage that may occur during the times the electronic system indicates the building was accessed by your Code/Fob, including your Code/Fob being deactivated. A person of at least 16 years of age must be present at all times and assumes responsibility for any damage during the time your Code/Fob is recorded in use. You may request that your Code/Fob be deactivated if you suspect that it has been comprised in any way. You may also deactivate your Code/Fob if suspicious activity or misuse of the facility is suspected at any time. The facility must be left as found, including returning all tables and chairs to where they were upon your arrival. Key Fob must be returned within 48 hours after your event. I acknowledge receipt of St. Germain Code of Ordinance, Chapter 17 — Community Parks & Buildings Usage I assume responsibility for the facility during the time the Electronic Security Code/Fob is assigned to me. Save completed form to you device, then send it as an		
Floatrania signatura	email attachment to: ienn.iones@stgermainwi.gov	
Electronic signature	Date	
Rental Agent Use Usage	e fee \$	
Date issued Secur	rity Dep. \$	
Key Fob # Sales	tax \$ Date payment received	
Access code	Total \$ Date dep. refunded	