



## **Rental of Waterbury Senior Center**

### **APPLICATION FORM**

CONTACT NAME \_\_\_\_\_ ORGANIZATION \_\_\_\_\_

CONTACT ADDRESS \_\_\_\_\_

CONTACT EMAIL \_\_\_\_\_

CONTACT PHONE \_\_\_\_\_

REQUESTED DATE \_\_\_\_\_ START TIME – FINISH TIME \_\_\_\_\_

#### **CHECK THE FACILITIES NEEDED**

<input type="checkbox"/>	Use of Ice Machine	<input type="checkbox"/>	P/A System. Microphone and/or play your own tunes from a phone
<input type="checkbox"/>	Use of Freezer	<input type="checkbox"/>	Ceiling Projector - HDMI or VGA inputs. Bring your own laptop
<input type="checkbox"/>	Use of Fridge	<input type="checkbox"/>	50" Smart TV - HDMI input. Bring your own laptop
<input type="checkbox"/>	Use of Steam Table	<input type="checkbox"/>	Keurig Machine – Bring your own K Cups

SPECIAL REQUESTS \_\_\_\_\_

**Email completed form to [director@wasca.org](mailto:director@wasca.org), or mail or hand deliver to Waterbury Area Senior Center, 14 Stowe St, Waterbury, VT 05676.**

**If approved, you will be asked to send one check for the rental at \$25/Hour (2 hour minimum ) and a second check for security deposit \$100. Assuming the center is left tidy with no damage the deposit check will be mailed back to you.**

#### **CENTER USE ONLY**

APPROVED YES/NO \_\_\_\_\_ APPROVED BY \_\_\_\_\_

ASSESSED CHARGE \_\_\_\_\_

PAYMENT and SECURITY RECEIVED DATE \_\_\_\_\_