

DICKSON HOUSING AUTHORITY RENTAL AGREEMENT

Name of applicant: _____ Date: _____

Address: _____

City/State/Zip _____

Phone: _____ Email: _____

Organization: _____ Title: _____

Area(s) Requested: Meeting Room _____ Gym _____

Date: _____ Time: _____

Estimated Number Attending: _____

Back-up Contact Person/Phone: _____

If this is a non-profit group you must provide an IRS letter

Will there be a fee or admission charged? Yes _____ No _____

Rental Fees

| <u>Meeting room</u> | <u>Gymnasium</u> |
|---------------------|------------------|
| \$40 for 1 hour | \$40 for 1 hour |
| \$50 for 2 hours | \$75 for 2 hours |

Residents will receive a 50% discount

Fees are due on the day of application with the balance due two weeks before the event.

We accept checks or money orders. We do not accept cash.

Deposits will be returned upon inspection of the room(s). We will do a pre-inspection and a post-inspection of rented facility. We suggest you take your own pictures of the area if you have any questions regarding the condition of the room(s). Any damages will be taken out of your deposit.

Renter's Signature _____ Date _____

DHA Representative _____ Date _____