

Afton "JOY" Community Center  
P.O. Box 199  
Afton, IA 50830  
Physical Location: 240 N. Douglas

**Community Center User Contract**

Date of Event: \_\_\_\_\_

\_\_\_\_\_  
Renter's Name Driver's License #

\_\_\_\_\_  
Renter's Address City State Zip

\_\_\_\_\_  
Phone Number

**Rental Rates:**

Monday through Wednesday Rates: Full Day \$50.00; Half Day \$25.00  
Thursday is reserved for Senior Meal Site during the day. Evening Rental Only: \$25.00  
Fri, Sat, Sun - Full Day Only: Profit or Private Groups - \$75.00; Non-Profit Organization \$50.00  
Refundable Damage Deposit \$75.00

**Rental Fee:** \$\_\_\_\_\_ **Date Paid:** \_\_\_\_\_ [ ] Cash [ ] Check # \_\_\_\_\_

**Deposit Fee \$75.00** **Date Paid:** \_\_\_\_\_ [ ] Cash [ ] Check # \_\_\_\_\_

[ ] **Deposit Returned to** \_\_\_\_\_ **Date:** \_\_\_\_\_

[ ] **Deposit Retained**

**TERMS of AGREEMENT**

AGREEMENT made this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between The  
*Afton JOY Community Center* and \_\_\_\_\_

**Witness, it is mutually understood and agreed as follows:**

1. The period of use and occupancy by the renter shall be on the \_\_\_ day of \_\_\_\_\_  
20\_\_\_\_\_.
2. The renter agrees to return the community center to the same condition of cleanliness  
existing at the commencement of their event. Tables and chairs returned to original  
place.
3. The renter agrees to be responsible and pay for any damages to the premises during the  
period of use and occupancy caused by the renter or agents, officer, employees, guests  
and invitees of the renter.

4. The *Afton JOY Community Center/City of Afton* hereby disclaims liability for any personal injury, property damage or property loss by the renter, or any agent, officer, employees, guests and invitees of the renter.
5. The renter, personally and as the representative of any group, corporation, partnership or association, with full knowledge and authority of any entity, hereby agrees to hold the *Afton JOY Community Center/City of Afton* fully harmless for any and all liability damages, court costs, and attorney fees resulting from any personal injury or property damages to any agent, officers, employees, guests and invitees or any third party which is caused to happen in connection with the use and occupancy of said premises by the renter.
6. The renter acknowledges that the premises are drug, alcohol and tobacco free and shall remain that way during the period of use and occupancy by the renter.
7. Use fee and damage deposit are to be paid prior to use and received in the City Clerk's office within forty-eight (48) hours after the reservation is made. The reservation is not confirmed until the fee is received.
8. Keys are to be picked up before use at the Afton City Clerk's Office, during the office hours of 8:00 am – 4:30 pm. Monday through Friday.
9. Decorations are permissible on the tables only. Nothing may be pinned or taped to the wall or ceiling.

**CLEAN UP (Before you leave):**

1. Sweep floor and wet mop Community Center and kitchen (wet & dry mop are in the store room). Wash food or other spills off the floor and counters. Wipe up any spills in microwave oven, stove top/oven, and refrigerator when finished using.
2. Take all garbage in plastic sacks and put them in the dumpster outside.
3. Put room back in original condition.
4. Check restrooms, flush stools if needed, and turn off lights.
5. Check heat/air-conditioning controls (winter: heat to 60, summer: cool to 80).
6. Turn off all lights.
7. Lock all Community Center doors.
8. Take Key to the City Clerk's Office or put it in the drop box in front door of City Hall.

I have read the above statement and agree by signing my name hereto:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I would like to check out a key to use the Sound System: \_\_\_\_Yes \_\_\_\_No

\*\*\*\*\*

Deposit Returned: [  ] Yes [  ] No Amount \$ \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Renter: \_\_\_\_\_