# Application for use of the

# Trenton Cultural Center

# **Please Print:**

## **Available Rental Times:**

Sunday-Thursday, 8 a.m.-11 p.m. Friday & Saturday, 8 a.m.-Midnight



| Group Name:                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                             |                                                                                  |               |                                      |                           |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------|---------------|--------------------------------------|---------------------------|
| Contact Name:                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                             |                                                                                  |               |                                      |                           |
| Address:                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | C                                                                           | ity:                                                                             |               | Zip Code:                            |                           |
| Phone:                                                                     | Cell:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                             | _ Email:                                                                         |               |                                      |                           |
| Alternate Contact                                                          | Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                             | Phone                                                                            | e:            |                                      |                           |
| Date Requested:                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                             |                                                                                  | S N           |                                      | <br>□ □<br>H F S          |
| Purpose of Use:                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                             |                                                                                  |               | of At endees<br>use max. seating 25) | Alcohol Use?  □Yes □No    |
| Indoor Usage Tin                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                             |                                                                                  |               | Office Us                            | e Only                    |
| caterer, set-up and clean<br>charged double the hour<br>□AM                | ly rental rate for the a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | dditional time. Minimu                                                      |                                                                                  |               | idency                               | ☐ Resident☐ Non-Resident  |
| □PM                                                                        | , , , , , , , , , , , , , , , , , , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                             |                                                                                  |               | e Rate                               | ,                         |
| □AM<br>□PM                                                                 | Event Start Time (t m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | e invitat on or publicit                                                    | y says event will begin)                                                         |               | rs. minimum)<br>ditional Hours       | \$                        |
| <br>□AM<br>□PM                                                             | Event End Time (t me                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | invitat on or publicity                                                     | says event will end)                                                             | _             | @hr.                                 | \$                        |
| <br>                                                                       | Exit Facility (t me you                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plan to exit the facilit                                                    | y af er event dean-up)                                                           |               | ecial Fee                            | \$                        |
| Total                                                                      | Total Indoor Hour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | rs of Use                                                                   |                                                                                  |               | al Amount Due                        | \$                        |
| Outdoor Usage T<br>of the outdoor space. Ter<br>rental. Special provisions | ime Table (Please in the rental set-up and talls may be requested in the r | note: an additional fee<br>ke down must be sched<br>yriting and will be con | will be assessed for use<br>duled on the same day of<br>sidered based on facilit | Rei<br>Dat    | ntal Deposit<br>e Paid:              | \$                        |
| usage schedule. *An ada                                                    | litional special fee will                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | be assessed for special                                                     | provisions.)                                                                     | Rei           | ntal Balance                         |                           |
| Request to use outdoor                                                     | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Tent set-up □yes □n                                                         |                                                                                  |               | e Due:<br>e Paid:                    | \$                        |
| □AM<br>□PM                                                                 | Arrive to premises (outdoor set-up begins, including any rental equipment i.e. tents, tables, chairs)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                             |                                                                                  | urity Deposit | Key Deposit                          |                           |
| □AM<br>□PM                                                                 | Depart from premises (t me you plan to complete dean-up of the outdoor space i.e. removal of tents, tables, chairs, trash)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                             | (Ch                                                                              | eck Required) | (Cash Required)<br>\$                |                           |
| Total                                                                      | Total Outdoor Ho                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | urs of Use                                                                  |                                                                                  | Dat           | e Deposits Due:                      | <u></u>                   |
| (We) hereby release the City of Trent                                      | on, its employees and agents, fro                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | m any responsibility whatsoever                                             | for any personal injuries, damage:                                               | s, use of pho | otographs or loss of equipr          | nent resulting from and/o |

I (We) hereby release the City of Trenton, its employees and agents, from any responsibility whatsoever for any personal injuries, damages, use of photographs or loss of equipment resulting from and/or arising out of such use, and I (We) specifically agree that this release and hold harmless shall apply to any and all claims or damages arising out of the consumption of use of alcoholic beverages. I (We) have further read the policies and rules governing the use of the facility and agree that we will abide by all rules and policies established for the facility's use. I (We) agree also that our group will leave the facility in good condition. It is also understood that all setting up of equipment, taking down and cleaning will be our group's responsibility before leaving the premises. I (We) further understand the facility can only be accessed during hours specified. Arriving earlier or leaving later than appointed time will result in a charge of double the hourly rate. I (We) further understand that must be present at the facility during the appointed times. Failure will result in termination of event and/or forfieture of 50% of security deposit.

| Print Name: | Signature: | Date: |
|-------------|------------|-------|
|             |            |       |

#### **Cultural Center General Rules**

- 1. Reservations must be made by an individual 21 years of age or older. The renter is required to be present at the facility and supervise activity during the entire course of the event to ensure all rules are upheld. If the renter is not at the function, the event is subject to termination and/or applicant may forfeit 50% of the security deposit.
- A \$30 cash deposit is required to obtain a key. You must obtain a key from the Recreat on Of ce during regular business hours. Business hours are Monday through Friday, 8:30 a.m. to 5:00 p.m. The key must be returned by 5:00 p.m. the following business day. A late charge of \$5.00 per day will be assessed for those not honoring this policy.
- 3. A \$125 (without alcohol) or \$250 (with alcohol) security deposit is required for all facility reservations. Security deposits are refunded (in part or in whole depending upon the condition of the facility) within 3 weeks after the event. The cost of replacing broken, damaged or missing equipment will be deducted from the security deposit. If the cost of cleanup and damages exceeds the amount of the security deposit, the applicant will be billed for the additional amount.
- 4. Cancellations must be made at least 30 days prior to scheduled use. Failure to cancel 30 days prior to use will result in forfeiture of your \$25.00 deposit.
- 5. You are responsible for damages and losses to the premises or equipment during the permit period. Misrepresentation of rental use will result in the forfeiture of all rental fees and damage deposit fees.
- 6. Groups requiring t me to decorate or make other preparations or needing additional set-up and clean-upit me must include this time on the rental request form. Groups that arrive before the "start time" or leave after the "end time" will be charged double the hourly rental rate for the additional time. No deliveries may be made prior to approve permit time.
- Vehicles are NOT allowed to be driven onto restricted areas of facility property to unload/load equipment, supplies etc. Designated areas will be ident f ed by City staf.
- 8. Refunds are not given for any unused port on of the time stated on the rental contract or if outdoor area was not used for any reason, including weather.
- 9. The City waives all responsibility concerning art des lost, stolen, or damaged within our facilities.
- 10. Renter will forfeit a minimum \$100 of security deposit for neglecting to follow rental rules and may result in refusal for future rental.
- 11. The City of Trenton reserves the right to inspect and control all functions that take place on the premises.
- 12 If the City of Trenton is unable to perform its obligat on of this agreement for any reason beyond its control, including but not limited to accidents, acts of God, mechanical failure, the City of Trenton will provide alternate site if available or will refund rental fees paid.

#### Cultural Center Indoor Use Rules

- 1. No tape, nails, staples, glit er, etc. will be permit ed on the walls, ceilings, foors or windows of facility.
- 2 The use of candles, open fames and smoke/fog machines are not permit ed
- 3. You are permit ed use of the downstairs area only.
- 4. All dishes, pots, and pans are for display purposes only and may not be used.
- 5. Use of stove/oven is permissible, but must not be lef unat ended when in use.
- 6. The permit holder is responsible for leaving the room in the same condition it was found. All garbage must be placed in outdoor trash bin, bagged and tied. Tables and chairs should be wiped down and floors may need to be swept, vacuumed and/or mopped. Decorations must be removed from interior and exterior premises.
- 7. Due to State and Federal Air-Quality Acts, this facility is smoke free. There will be NO SMOKING inside this facility.
- 8. Fireplaces may not be used.
- 9. No caust c materials should be put in any of the sinks.
- 10. All kitchen appliances, sinks, and counters should be lef in an orderly fashion. All trash is to be disposed in outside enclosed dumpster. No food may be lef in the refrigerator by order of the Health Department. Sweep debris from f oor and mop spills.
- 11. All fans and lights, except night lights, must be turned of and all exit doors secured before leaving the building.
- 12. The circuit breaker boxes must not be tampered with.
- 13. For public safety, all exits must be dear from obstruct on at all t mes.

#### Cultural Center Outdoor Use Rules

- 1. If addit onal equipment is being rented from an outside rental company for your event, it is the responsibility of the renter to make arrangements to meet the rental company at the facility to accept the deliveries. Arrangements must also be made by the renting party to have all decorations and rental equipment picked up and removed from the facility during the reservation time. The City of Trenton is not responsible for rental company equipment while on the premises including but not limited to any damage or theforeign by the renting party or hired services.
- 2 Special provisions for tent rental set-up may be requested in writing and will be considered based on facility usage schedule. A minimum of \$25 special fee will be assessed for special provisions.
- 3. Storage is not available before or af er your event.
- Outdoor Porta John is available on premises for outdoor usage. Addit onal porta john may be required at renters expense for part es exceeding 100
  guests.
- 5. Outdoor rental usage and music must all end at 10.00 p.m. Music must be kept at a moderate decibel level. Police will be summoned if level is too loud.
- 6. Removal, cut ng, pruning of fowers, trees, bushes or plants from the grounds without departmental permission is strictly prohibited.
- 7. Basic 20 amp electrical circuit is available for use.
- 8. Renter must provide 55 gallon trash bags for trash containers. All trash must be removed from recept cals and placed in dumpster.
- 9. Use of the outdoor fre pit is available through permit only. Please inquire with department.

| I have read and understand and will adhere | to the rules set orth above. |
|--------------------------------------------|------------------------------|
|--------------------------------------------|------------------------------|

| Print Name: | Signature: | Date: |
|-------------|------------|-------|
|-------------|------------|-------|

## TRENTON CULTURAL CENTER BUILDING RENTAL FEES

### BOOKING FEE PAYABLE AT TIME OF RESERVATION

Before your event/group can be scheduled in the facility, the City of Trenton requires a **\$25.00** booking fee at time of reservation. Full balance of rental fee is due **30 days** prior to scheduled rental date.

| fee at time of reservation. Full balance of rental fee is due <b>30 days</b> prior to scheduled rental date. |                              |           |               |  |
|--------------------------------------------------------------------------------------------------------------|------------------------------|-----------|---------------|--|
| ALL PROFIT-MAKING ORGANIZATION                                                                               | NS & PRIVATE FUNCTIONS       | RESIDENTS | NON-RESIDENTS |  |
| Monday - Thursday                                                                                            | *Based on four hours of use  | \$100.00  | \$175.00      |  |
| Friday - Sunday                                                                                              | *Based on four hours of use  | \$125.00  | \$225.00      |  |
| Each additional hour over the first fou                                                                      | ır hours                     | \$15.00   | \$20.00       |  |
| Outdoor Usage (flat fee)                                                                                     |                              | \$50.00   | \$75.00       |  |
| ALL RESIDENT NON-PROFIT ORGANIZATIONS OR SCHOOL FUNCTIONS                                                    |                              |           |               |  |
| Monday - Thursday                                                                                            |                              | No Charge |               |  |
| Friday - Sunday                                                                                              | *Based on three hours of use | \$50.00   |               |  |
| Each additional hour over the first fou                                                                      | ır hours                     | \$15.00   |               |  |

#### DAMAGE DEPOSIT & KEY DEPOSIT FEE

\$25.00

A security and key deposit is required for rental of all City Facilities. The deposits will be returned to the group/individual once it has been ascertained that the building was left in good condition and facility key returned the following business day. Damage deposits are due day of facility key pick-up; this must be in the form of a check. A \$30.00 cash deposit is required to obtain facility key.

| All profit making organizations & private functions WITH ALCOHOL CONSUMPTION    | \$250.00 |
|---------------------------------------------------------------------------------|----------|
| All profit making organizations & private functions WITHOUT ALCOHOL CONSUMPTION | \$125.00 |
| All resident non-profit, school or city sponsored groups                        | \$50.00  |

#### **CANCELLATIONS**

Booking fee is refundable if cancellation is made prior to **thirty (30)** days before rental. Be advised that it may take as long as **three (3)** weeks to obtain a refund, due to the fact that all out-going city checks must be approved by City Council and that those meeting are only scheduled on the first and third Monday of each month.

#### **PRIORITY USE OF CITY FACILITIES**

The City of Trenton, in an effort to cooperate with and to encourage all civic groups who work for the welfare of the residents of the City of Trenton, has formulated the following policies to clarify the use of the City's activity buildings. The policies are listed accordingly to priority.

- 1. All Trenton Recreation Sponsored Activities will have priority over all other clubs, groups or organizations in the City of Trenton.
- 2. Civic groups or organizations for special functions.
- 3. Boy and Girl Scout special events.

Outdoor Usage Friday - Sunday (flat fee)

- 4. Resident Church organizations for special events.
- 5. Other resident non-profit community groups not mentioned above.
- 6. All private uses such as showers, weddings, parties, etc.