



**TOWN OF CROSS PLAINS
TOWN HALL RENTAL AGREEMENT**

Date of Event: _____

Person Responsible for Hall Rental: _____

Phone Number(s): Work _____ Home _____ Cell _____

Email: _____

Type of Event: _____

- I agree to take full responsibility for any damages caused to the Town Hall, Shelter and/or the Kalscheur Park property.
- I agree to abide by all Town of Cross Plains Town Hall Rental Policies.
- I agree to take full responsibility for any beer, wine, or wine coolers which may be served in the area that I have reserved. I also understand that no hard liquor is to be allowed on the premises.

By signing this document, I understand that the Town of Cross Plains is free to retain the entire deposit as well as hold me responsible for any damages which may be caused to the Town Hall or Shelter. Deposit checks will be held in escrow until the 2nd Monday of the month after rental. Town will reimburse deposit after approval of the Town Board.

Signature of Responsible Party

Date Signed

Signature of Town of Cross Plains Representative

Note: Hall is not officially rented until deposit is received.

FOR OFFICE USE ONLY

Deposit Received _____ Rental Fee Received _____ Office Calendar _____ Security Deposit Check Returned _____