

Bay City Civic Center Contract

Bay City Civic Center

201 Seventh Street - Bay City, TX 77414

(979) 245-8333 / (800) 806-8333 / Fax (979) 245-1622

Today's Date: _____ Purpose of Rental: _____ Attendance Expected: _____

Your Name: _____ Business / Organization Name: _____

Address: _____ City & State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Room(s) Requested: _____

Date(s) Requested: _____ Time Requested: _____ am/pm - _____ am/pm

	Deposit	Receipt #	Date Paid	Rent Fee	Receipt #	Date Paid
Room #						
Room #						
Alcohol				n/a	n/a	n/a

_____ All room diagrams are required no later than seven (7) days prior to the event. Any changes after the deadline are subject to a \$60 change fee.

_____ All rental fees must be paid in full thirty (30) days prior to the event.

_____ I understand that I must have all of my guests and all equipment/decorations out of the facility at 1 a.m. I understand that failure to do so may cause forfeiture of my deposit.

_____ I further understand that I may be held financially responsible for any damage caused by my failure to comply with the rules and regulations, in excess of my deposit.

_____ I further agree to comply with the basic requirements and cleanup as listed in section 8 of the Civic Center Rules and Regulations.

_____ I understand that I must arrange for security as listed in section 12 of the Civic Center Rules and Regulations.

_____ I have read the rules and regulations that govern the Bay City Civic Center and I agree to comply with them.

Signature of Rental Applicant _____

Signature of Civic Center Staff Person Booking Request _____

All checks must be made payable to: The City of Bay City