

**RENTAL AGREEMENT FOR USE OF SAINT MICHAEL PARISH CENTER**

(Please Print Clearly)

DATE AND TIME REQUESTED:

Event Date \_\_\_\_\_ Event Duration (start to finish times) \_\_\_\_\_

Set-up Time \_\_\_\_\_ to \_\_\_\_\_ Set-up Date & time (if different) \_\_\_\_\_

Subsequent dates (if any)

- Daily: until \_\_\_\_\_ (ending date)
- Weekly: every \_\_\_\_\_ (e.g., Monday) until \_\_\_\_\_ (ending date)
- Monthly: The \_\_\_\_\_ (e.g., the 3<sup>rd</sup> Monday) until \_\_\_\_\_ (ending date)

Except (dates to skip): \_\_\_\_\_

DESCRIPTION OF USAGE:

Event or activity \_\_\_\_\_

Usage Topic (circle one):

- |                               |                                       |                          |
|-------------------------------|---------------------------------------|--------------------------|
| 1. Parish religious education | 5. Parishioner event                  | 9. Non-parishioner event |
| 2. Parish administration      | 6. Community event                    | 10. Other _____          |
| 3. Parish ministries etc.     | 7. Parish fundraiser                  | _____                    |
| 4. Parish social event        | 8. Fundraiser for other organizations |                          |

# Adult Attendees \_\_\_\_\_ # Children \_\_\_\_\_ Will alcoholic drinks be served? (\*insurance required\*) \_\_\_\_\_

Will food be served/type? \_\_\_\_\_ Name/Tel # of caterer \_\_\_\_\_

Will there be money transactions on the premises (admission fees, sales, etc.)? \_\_\_\_\_

Set-up Needs (e.g., seating at tables, theater-style seating, refreshment tables, dance area, bar, stage, a/v equipment, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REQUESTED BY: (Please Print Clearly)

Name \_\_\_\_\_ Organization \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_ Web Address \_\_\_\_\_

Please Circle All that Apply: Parishioner Non-parishioner For-profit Non-profit Community

I have read the Terms & Conditions for Rental of the Saint Michael Parish Center, agree to comply with all aspects of it and this agreement, and accept responsibility for compliance. I will also take full responsibility for any loss incurred or damage to Parish goods, equipment and property:

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

Return this request with deposit or payment in full to:  
**PARISH OF ST MICHAEL, Rental Office, 90 Concord Road, Bedford, MA 01730**

OFFICE USE ONLY:

Request received on \_\_\_\_\_ Security deposit amount \$ \_\_\_\_\_ Date \$ received \_\_\_\_\_

Room(s) assigned \_\_\_\_\_ Rental fee (30 days ahead) \$ \_\_\_\_\_ Date \$ received \_\_\_\_\_

T&C Violations No Yes (describe on back) Date & amount of deposit returned \_\_\_\_\_