

SENIOR CENTER
14480 Webster Road, Bath, MI 48808

Capacity: 85

Date of Event: _____ Time: FROM: _____ A.M./P.M. TO: _____ A.M./P.M.

Rental Purpose: _____

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: (Day) _____ (Night) _____

I have received a copy of the Bath Charter Township Facility Rental Policy. I agree to abide by all policies and rules as written. I also agree that I am responsible for all damages to or liable for the facility listed above for the duration of the rental period.

Applicant Signature: _____ Date: _____

DEPOSIT - \$100.00

RENT: Kitchen is not available for personal use / private events.

	Resident	Non-Resident	Funeral ¹	Non-Profit
2 Hours:	\$40.00	\$50.00	Resident Rate	No Charge
6 Hours:	\$100.00	\$125.00	\$50.00	No Charge
Full Day:	\$200.00	\$250.00	\$50.00	No Charge

501(c)3: _____

In-Kind or Community Related Donation – Explain: _____

TOWNSHIP USE ONLY			
DEPOSIT:	<input type="checkbox"/> \$100.00	PAID:	____/____/____
701-000-279			
RENT:	<input type="checkbox"/> \$40.00 <input type="checkbox"/> \$50.00 <input type="checkbox"/> \$100.00	PAID:	____/____/____
	<input type="checkbox"/> \$125.00 <input type="checkbox"/> \$200.00 <input type="checkbox"/> \$250.00		
	<input type="checkbox"/> Other: _____		
	KEY# _____	OUT:	____/____/____
211-000-667			
		RETURNED:	____/____/____
Township Signature:		Date:	

¹ Decedent is to be interred in Pleasant Hill or Rose Cemetery, or decedent was a current resident of Bath Charter Township.

Any such service organization which uses Township facilities free of charge shall still abide by all other requirements of this Facility Rental Policy including submitting a reservation/application form, providing a security deposit, and following the rules of the facility.