

**Orwigsburg Borough Recreation Commission
Memorial Building Request Form**

Phone: 570-366-3103 Fax: 570-366-3106 e-mail: sherry@orwigsburg.net

Your reservation is not official until form is submitted to the Borough Office

Date _____ Telephone Number _____

Name of Organization/Individual _____

Address _____

Activities Scheduled _____

Reservation Dates(s) Requested _____

Reservation Times(s) Requested _____

Actual Start & Finish Time of Event _____

Will You Require Use of the Kitchen? _____

Will You Be Using the Bleachers? _____

Do You Have Any Other Special Arrangements, Requests, or Things We Should
Know? _____

We/I Certify That We Are a _____ Non-Profit _____ Profit Organization

Will You Be Charging an Entrance Fee? _____

Are You Holding This Even for Profit? _____

Is the Group/Individual Covered by Liability Insurance? _____

If yes, what is the amount of coverage? _____ Note: The Borough must be provided with a certificate of insurance stating that a minimum of one million dollars coverage is held by the insured.

Note: Rosters showing names and addresses of all team members must be attached to this request form.

Agreement with Orwigsburg Borough for Use of Borough Facilities

The undersigned, for and on behalf of the organization and activity designated above, does, in consideration for the use of Orwigsburg Borough property and/or facilities agree that the said organization shall be responsible to the Borough of Orwigsburg for any damages, excess cleaning charges and/or any other property of the Borough which is destroyed or misused. The undersigned agrees to make payment in full to the Borough of Orwigsburg within thirty (30) days of receipt of an invoice for such damages or repairs. Further, the undersigned agrees to hold the Borough of Orwigsburg harmless from any liability for any personal injuries or property damages resulting from the aforementioned activities being held by the organization or individual.

Payment for scheduled events/activities is due and payable one (1) week in advance of the scheduled event and is not subject to refund. The undersigned also acknowledges that they will inform the Borough in writing of any changes and/or cancellations. See attached fee schedule.

For the Borough:

For the Organization:

Name (Signature)

Name (Signature)

Official Position

Official Position

Date

Phone Number

For Orwigsburg Borough Use Only:

Approved _____

Not Approved _____

-If any difficulties should occur please contact Steve @ 570-691-5457 or the Orwigsburg Police Department @ 570-366-3101 if no answer - County Comm Center @ 570-628-3792.

Veterans Memorial Building Fee Schedule

Group or Organization

Fee

Within the Borough

Service Group	\$15 per hour, \$75 per day
Non Profit	\$15 per hour, \$75 per day
Other Groups	\$50 per hour, \$300 per day
Individuals	\$50 per hour, \$300 per day

Outside the Borough

Service Group	\$75 per hour, \$500 per day
Non Profit	\$75 per hour, \$500 per day
Other Groups	\$100 per hour, \$750 per day
Individuals	\$100 per hour, \$750 per day

\$1000.00 Security Deposit Posted by all Outside the Borough Groups & Individuals

Blue Mountain & Un-sponsored Groups	\$25.00 per hour
Kitchen Use	\$25.00 per hour

Large Conference Room

Within the Borough

Service Group	\$10 per hour, \$50 per day
Non Profit	\$10 per hour, \$50 per day
Other Groups	\$25 per hour, \$200 per day
Individuals	\$25 per hour, \$200 per day

Outside the Borough Use for Large Conference Room X's 2, Plus \$100 Security Deposit

All Fees are Effective July 01, 2016