**APPLICATION FOR USE OF AUBURN TOWN HALL**

**Name of Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time frame of event:** \_\_\_\_\_\_\_\_\_ until\_\_\_\_\_\_\_\_\_\_\_

**Contact Person (**must live in Town of Auburn): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address:**

**Fee Schedule: $100.00/**day for Auburn Town resident

**$50.00 deposit is required**

Please write 2 separate checks. This deposit will be refunded in 10 days, if the hall is left in the same condition that it was found.

Make checks payable to: **Town of Auburn**

Renter agrees to leave the facility in the same condition\* as it was found and further agrees to be responsible for any damage done during use of the Town Hall. It is also understood that renters will be responsible for any extra cleaning necessary after use of the Town Hall. Any accidents or problems should be reported to the Town Clerk – 715-456-7094.

If alcoholic beverages are to be served, Renter is responsible for related actions and/or possible damages. The undersigned responsible party has read the attached regulations pertaining to use of this facility and agrees to abide by their provisions.

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

**Mail application and payment to:**

Sandi Frion

5783 220th Avenue

New Auburn, WI 54757

**\*\*\*\*Confirmation of reservation will be emailed**

\* Hall must be cleaned, vacuumed and all garbage removed.

\* No tape or thumb tacks on the walls.

\* Heat must be turned down to 60 degrees.

\* Hall will be checked for damages and deposit returned within 10 days.