

Sullivan County American Legion Post #228
RENTAL / LEASE AGREEMENT
Revised 7/10/2021

Print this form, fill it out, sign and date it, and submit 2 copies to the Post.

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GROUP DESIRING USE: \_\_\_\_\_

PERSON RESPONSIBLE: (please print) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

TYPE OF ACTIVITY: \_\_\_\_\_

EXPECTED NUMBER OF PERSONS ATTENDING: \_\_\_\_\_

DATE DESIRED: \_\_\_\_/\_\_\_\_/\_\_\_\_ (from) \_\_\_\_ (to) \_\_\_\_

DO YOU PLAN TO USE THE KITCHEN FACILITIES? \_\_\_\_\_

WILL ALCOHOLIC BEVERAGES BE CONSUMED? \_\_\_\_\_

*(If so, security is required and Alcoholic Beverages may not be sold or a charge made for same and may not be served to minors)*

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The undersigned does hereby acknowledge that he/she is familiar with and fully understands the Rules and Regulations pertaining to the American Legion Hall, and further agrees to abide by such Rules and Regulations as a condition of this application being granted. Further, the undersigned agrees to hold the American Legion harmless from any incident that should occur while the facility is under lease.

SIGNATURE: _____ DATE: ____/____/____

RENTAL FEE PAID: \$ _____ RECEIVED BY: _____ DATE: ____/____/____

SECURITY PAID: \$ _____ RECEIVED BY: _____ DATE: ____/____/____

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PREMISES INSPECTED AFTER EVENT ON \_\_\_\_\_ at \_\_\_\_\_ BY \_\_\_\_\_

RECOMMENDS RETURN OF \$ \_\_\_\_\_ RETURNED ON \_\_\_\_\_ BY \_\_\_\_\_

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