

# Crosswicks Community House Rental Agreement

Please return signed agreement to: Peter Kelly c/o **Crosswicks Community Association / PO Box 128 / Crosswicks, NJ 08515 ( or by email )**

RENTER Name \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time: \_\_\_\_\_ Access Time? \_\_\_\_\_

Description of Event \_\_\_\_\_

Phone # \_\_\_\_\_ (H) (C) Alternate # \_\_\_\_\_

**Email address** \_\_\_\_\_

\$385-WHOLE BUILDING: \$ \_\_\_\_\_ \$235-DOWNSTAIRS ONLY \$ \_\_\_\_\_

SECURITY DEPOSIT(separate check): \$ 200 **TOTAL AMOUNT: = \$ \_\_\_\_\_**

**Make checks payable to CCA** – Payment is due 3 weeks prior to the event. Failure to pay may result in loss of reservation.

Rental deposit is by separate check which will be returned after inspection of building.

**Forfeiture of deposit may occur in the event damage or violation of code of conduct.**

## CODE OF CONDUCT

- Event must conclude by 1 o'clock am.
- All **music must be turned off by 10pm**, out of consideration for our neighbors.
- Excessive noise will result in loss of deposit and/or denial of future events.
- Renter reserves use of the building only. Use of grounds per special arrangements only.
- Guest must not drive or park on grass surrounding the Community House.
- NO SMOKING is allowed inside the Community House. (Butt can provided outside)
- Building capacity is 100 persons per floor. –Depends on Set-up)
- No ALCOHOLIC BEVERAGES are to be served unless arrangements are made with the Association and an appropriate INSURANCE COMPANY. (See Addendum)

## CLEANUP CHECKLIST

- Pick up, wipe up, spilled food or trash.
- Take trash to the dumpster.
- If used clean out refrigerators
- Vacuum carpet & sweep floors
- Remove food and decorations.
- Wipe down tables and chairs, and re-stack.
- Close & lock all windows and doors.
- Turn off lights and return all building keys.

**Please report any problems immediately to Peter Kelly @ 609-379-2342 (cell)**

If Peter is not available try Aisling O'Hara @ (541) 905-1235 (cell)

As renter, I certify that to the foregoing statement of use is true & accurate. I further certify, if applicable, that I have authority to obligate the organization that is renting the facility.

Dated \_\_\_\_\_ Print Name \_\_\_\_\_

Sign Name \_\_\_\_\_

Agreed & accepted \_\_\_\_\_  
o/b/o Crosswicks Community Association Inc.