



Tyrone Township Hall Usage Form

Association/Group Requesting Hall: _____

Contact Person: _____

Phone Number: _____ Fax#: _____

Meeting Date: _____

Meeting Time: *Begin:* _____ *End:* _____

Date of request: _____

Is building key required? Yes No If yes, date to pick up key: _____

Meeting type? Private Public

OFFICE USE ONLY

Date Posted To Calendar: _____ Initials: _____

Key Returned: _____

Cancellation Information

Date Canceled:

Person Canceling:

Reschedule Date:

**TYRONE TOWNSHIP
HALL USE AGREEMENT**

I, _____ hereby agree to the following conditions for the use of the Tyrone
(Name)

Township Hall for _____ for the purpose of _____.
(Association/Group) (Purpose or event)

1. The key given to me is for accessing the hall on (date) _____, for the gathering of the above-identified group. If the key is lost I agree to pay the actual cost of replacing the affected locks at the Township even if it exceeds the fee and deposit.
2. The deposit of \$150.00 is provided to cover the cost of any added cost to the Township, including cleaning, repairs, etc. If there are no added costs, the deposit will be returned, minus the Hall Rental Fee of \$75.00 for each event. Deposits are refunded within 3 weeks.
3. The key must be put in the drop box after the event or returned to the township the following business day.
4. The group will clean and restore the township hall to its previous condition. All refuse shall be placed in outside garbage containers for removal by the Township waste hauler.
5. Access to telephones and office areas is not allowed.
6. The group **WILL NOT SERVE NOR ALLOW ANY INDIVIDUAL TO SERVE ANY ALCOHOL** beverages in the facility or anywhere on the property of the hall.
7. The group will be responsible for locking the doors, turning out the lights, unplugging any electrical appliances that were used, and restoring the hall to its previous condition.
8. In case of emergency or questions on the day of the event, etc. please contact a township official below:

| | |
|-----------------------------|--------------|
| Mike Cunningham, Supervisor | 810-498-5757 |
| Marcie Husted, Clerk | 810-955-5660 |
| Jennifer Eden, Treasurer | 810-287-4886 |

9. In the event the hall is unusable for any reason (example: power outage, flood) the township cannot be held accountable; all fees paid will be refunded.

RELEASE AND INDEMNITY. The Association/Group agrees to assume all risk of loss and to indemnify and hold the Township, its officers, trustees, agents, and employees, harmless from and against any and all liabilities, demands, claims, suits, losses, damages, causes of action, fines or judgments, including costs, attorney fees, and witness fees, and expenses instant thereto, for injuries to persons (including death) and for loss of, damage to, or destruction of property (including property of the Township), arising out of or in connection with this Agreement unless caused by the gross negligence or willful misconduct of the Township, its officers, trustees, agents, or employees. In the event that any damage or claim is made or suit is commenced against the Township, the Township shall give prompt written notice thereof to Association/Group and the Association/Group shall have the right to compromise or defend the same to the extent of its own interest.

I have read, understand, and agree to the rules, conditions and limitations stated above.

Signature _____ Print Name: _____

Home Address _____

Home Phone _____ Work Phone _____

CHECK REQUEST FOR REFUND OF DEPOSIT

DATE: _____

To Whom The Check is Made out to: _____

Address to **Mail the Check**; Street: _____

City/State/Zip _____

MI _____

AMT: _____

REASON FOR REQUEST:

Refund of Hall Rental
Deposit

If other than refund of hall rental deposit- please explain:

Township Use Only

FROM ACCT (name & GL #): _____

Common _____

Note to Cashier:

RECEIVED BY:

