

MEDFORD MEMORIAL COMMUNITY CENTER
21 South Main St.
Medford, NJ 08055
609-922-1629
gcsinclair@comcast.net

**“IN MEMORY OF THOSE WHO SERVED THEIR COUNTRY”
LICENSE TO USE FORM
(Contract)**

USER:

PHONE:

ADDRESS/email:

TYPE OF EVENT:

Number of People Attending ***Beer & Wine Yes

Time Period: Day:
 Date:
 Time of Arrival:

This is an agreement between the above-mentioned User and the Medford Memorial Community Center, a New Jersey nonprofit corporation (“Owner”). If more than one User is named above each of them shall be jointly responsible under this Agreement. In consideration of their mutual promises contained herein, the parties hereby agree as follows:

Total Amount - \$
Deposit \$ with signed contract
Balance due \$

Payment for the event is non-refundable upon review, deposit and signature of the contract.

******Any Users that provides alcoholic beverages to their guest shall provide a copy of their homeowner’s insurance policy with their deposit. No reservation will be confirmed without this document.***

PURPOSE AND RESTRICTIONS: User may not use the Community Center for any purpose other than the Event as described above. User shall not use the Community Center for any unlawful purpose nor for any purpose inconsistent with the purposes of the Owner. User shall not use the Community Center in any way which would constitute a nuisance, shall not damage or waste the Community Center in any way, and shall not obligate the Owner in any way. **SMOKING IS PROHIBITED INSIDE THE BUILDING.**

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ACKNOWLEDGMENT OF THE TERMS OF LICENSE: The User and Owner agree to the terms of this contract by signing below.

Date: Medford Memorial Community Center: *Carol Sinclair*

I have read and will abide by all house rules concerning the use of the building.

Date **User**

Please sign and return with deposit and insurance information.

Thank You.