

# PARTY PACKAGE RENTAL AGREEMENT

## STRATTON ACTIVITY CENTER

918 Colorado Avenue, P.O. Box 64  
Stratton, CO 80836

### CONTACT INFORMATION

First Name:	Last Name:
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### ADDRESS

Mailing Address:		
City:	State:	Zip Code:

### PHONE

Daytime:	Evening:
Primary Cell:	Secondary Cell:

### PARTY INFORMATION

Date of Party:	Start Time:	End Time:
Type of Party:	Number of Guests:	

1. The Stratton Activity Center (SAC), south room may be rented for private parties
2. Terms for the party rental are as follows:
  - a. Three (3) Hour Rental
  - b. \$50.00 Rental Fee, includes twenty (20) party guests
  - c. Additional party guests are \$1.00 per person
  - d. \$25.00 Key Deposit, due with Agreement, refunded after key is returned and building has been inspected.  
(If paying deposits by check please use separate check, so they may be returned to you as your refund.)
3. Rental Agreement must be filled out and turned into the Town Clerk's Office, 127 Colorado Avenue, Stratton, CO
4. A \$30.00 non-refundable deposit will be made at the time of the reservation. This amount will be applied to the rental fee.
5. The Key Deposit and the remaining rental fee of \$20.00, plus any additional party guest fee will be due when the key is picked up.
6. All of the rules and regulations of the SAC shall be observed. Upon leaving the SAC at the end of the party, the facility must be left in the same condition as it was found, including removal of all trash. The renting party will be responsible for any damages that occur during the party rental.
7. All activities are tracked and the building is under video/audio surveillance.
8. \$100.00 cleaning fee will be charged if the Town of Stratton has to clean the room after your rental.
9. No alcoholic beverages will be permitted.
10. Bicycles, scooters, skateboards, bats, baseballs, golf clubs and golf balls, hockey sticks and pucks are not allowed inside the building. Roller skates, and roller blades, are allowed.

In consideration of the SAC allowing me/us to use the facility, I/we hereby waive and release the SAC, ownership, and employees from all liability for any and all damages and injuries suffered by myself/us in connection with said use of this facility.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

For Staff Use:

Amount Paid: \_\_\_\_\_  Cash  Check # \_\_\_\_\_