TOWN OF BURKE

5365 Reiner Road, Madison, WI 53718 • (608) 825-8420 • TownofBurke.com

	BURKE FA	ACILITY RE	ENTAL AGR	REEMEN	IT			
RENTAL TYPE:					RENTAL F	EE:	DEPOSIT:	
Outdoor Park Shelter (up to 75 people)						day	\$250.00	
Community Room Small Event (up to 50 people, five 8' tables 50 chairs)						day	\$500.00	
Community Room Large			-	hairs)	\$500.00/	day	\$500.00	
Community Room Train	ing, Meeting, Educati	ion WEEKDAY	(up to 100 peo	ple)	\$150.00/	event	\$250.00	
Community Room Burk	-			· -	\$100.00/		\$250.00	
Consumption of Alcohol Appl Submit payment for rental fe submittal. Cancellation fee of	e+deposit payable to f \$50 will be deducted	Town of Burke from refund fo	with rental agr	eement. Fu less than 1	ıll payment wil	-	sited at time of	
NAME OF RESPONSIBLE PARTY (mu	ust be present day of renta	nl)	MAILING ADDRES	SS				
PHONE			EMAIL					
EVENT DESCRIPTION					APPROXIMATE A	TTENDANC	F	
					7.1.1.107.117.1127.		-	
EVENT DATE	BEGIN TIME	END TIME		#CHAIRS NE	EDED (INDOOR)	#TABLES N	NEEDED (INDOOR)	
/ /	: AN	1/PM	: AM/PM					
FACILITY RULES & REGULATIONS:								
1. No smoking, smoke machines, or vaping in the Building. If outdoors, cigarette butts must be properly disposed of.								
2. Alcohol may be consumed	• •	-						
3. No pets allowed in Town Hall Building or in Burke Town Hall Park (except service animals).								
4. Use of adhesive, tape, tacks, nails, staples, screws, or any fasteners prohibited this includes walls and ceiling.								
5. No confetti, glitter, rice may be used/thrown. No standing on any furniture.								
6. Placement of tents, bouncy houses and other temporary structures on Town Hall or Park property is prohibited. 7. Amplified sound devices prohibited in park unless prior authorization is sought from Town Board.								
8. Renter must supply own cl	•	•	•					
9. All trash and recycling gene	•	•	-	•				
10. All rentals must be complete by 10 pm and the building locked prior to 10:00 pm.								
	SE	CURITY DEPOS	SIT FORFEITURE	S:				
1. Fail to secure/lock building = Full deposit plus cost of missing items or damage from leaving building unlocked.								
2. Cause alarms to sound and emergency response to be called - Full deposit plus cost incurred.								
3. Damages to facilities charged at actual cost of items/repair parts plus labor cost of \$50/hour (minimum charge \$50). 4. Fail to complete cleaning checklist items = labor cost at \$50/hour, 2-hour minimum.								
					ro racks/stacks	¢E∩ flat :	foo	
5. Fail to return tables/chairs								
The undersigned agrees to be for any expense incurred by, or Town of Burke, its servants, at the use of Town of Burke facility undersigned. The undersigned the above-listed regulations of Ordinances regarding Regulations	at, or in consequence of agents, and employees illities by the undersigned understands that the for use of Town of Bur	of use of Town s harmless fron ed, and any ar ne Town has se ke facilities as	of Burke facilition any and all cand all persons per curity cameras in well as the curity cameras in well as Title 4, 0	ies. The ur uses of act ermitted oi inside and	ndersigned furt tion, claims or on the premises outside and fu	her agree damages at the fac rther agre	es to hold the arising out of cilities by the ees to abide by	
APPLICANT SIGNATURE:					DATE:			

Fee Received:

OFFICE USE:

Check#:

Deposit Received:

Check#:

Approved by:

Date:

DATE:

PARK SHELTER RENTAL CHECKOUT

Complete & leave in mailbox outside Town Hall entrance

Trash and recycling generated during rental taken to dumpsters by Town Gar	rage.
Outdoor bathrooms used during rental are reasonably cleaned.	
Floor of park shelter and parking areas used by your guests are free of debris	s (including cigarette butts).
Coals of grill are completely extinguished.	
Lights are turned off.	
Report known issues/damage:	
Failure to complete items on this checklist will result in use of deposit funds as t	follows:
 Damages to facilities charged at actual cost of items/repair parts plus labor cost of \$50 	
2. Fail to complete cleaning checklist items = labor cost at \$50/hour, 2-hour minimum.	• • • • • • • • • • • • • • • • • • • •
RENTAL DATE PERSON COMPLETING CHECKLIST	PHONE NUMBER
L Deposits are returned via check to the party who paid for the rental. If damage exceeds the depose	l sit amount, the renter will be invoiced for
costs in excess of deposit. The Town will pursue collection and/or legal action for unpaid invoices.	
OFFICE Description of damages/deposit deductions:	Amount Returned & Date:
USE:	
 Tables & chairs wiped down Tables & chairs returned to match room layout on refrigerator; extra tables of Community Room floor swept and any spills mopped. All food/beverages removed from refrigerator and refrigerator wiped down at Kitchen counter, sink and microwave wiped down as needed. Kitchen floor swept and any spills mopped. Trash and recycling taken to dumpsters by Town Garage. 	
	···· acr in large stall if needed
 Restrooms clean (no paper on floor, toilets flushed/clean). Toilet brush & plu Parking areas used by your guests are free of debris (including cigarette butts) 	
	S).
All doors pulled tight & locked.	
Code is entered on keypad to lock building (ensure light is red before leaving	;).
Report known issues/damage:	
Failure to complete items on this checklist will result in use of deposit funds as f	
1. Fail to secure/lock building = \$250 fee plus cost of missing items or damage from leav	-
2. Damages to facilities charged at actual cost of items/repair parts plus labor cost of \$50	0/hour.
3. Fail to complete cleaning checklist items = labor cost at \$50/hour, 2-hour minimum.	
4. Fail to return tables/chairs to layout on refrigerator & place extra tables/chairs on stor	
RENTAL DATE PERSON COMPLETING CHECKLIST	PHONE NUMBER
<u> </u>	
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