



LIMERICK COMMUNITY CENTRE
RENTAL AGREEMENT

USE OF CENTRE FOR RECEPTIONS, DANCES, DINNERS, FAMILY REUNIONS, ETC.

TOWNSHIP RESIDENTS \$100.00 payable to Limerick Township
NON-RESIDENTS \$125.00 payable to Limerick Township
USE OF KITCHEN FOR COOKING \$25.00 payable to Limerick Friends Club
Deposit of \$50.00 required when booking, non-refundable if cancelled within 30 days of event.

CAR RALLEY OVERNIGHTER \$125.00

AFTERNOON TEAS, SHOWERS, BIRTHDAY PARTIES, ETC. \$ 40.00 for Three (3) Hours
\$20.00 per Hour Thereafter
ADDITIONAL FEE FOR KITCHEN RENTAL \$25.00 per use

Liquor Licence – Renter to obtain own liquor permit and to retain bar proceeds _____ If selling liquor under an L.C.B.O. licence, a photocopy must be given to the Municipality, along with proof of third party liability coverage with the Municipality as named insured.

Bar Tender (2) if Provided by Community Centre Committee \$100.00

WEEKENDS AND STATUTORY HOLIDAYS RENTED BY THE DAY ONLY
FUNERAL LUNCHES FREE IF CENTRE AVAILABLE – TO CURRENT LIMERICK RESIDENTS ONLY

RULES FOR RENTAL OF FACILITIES

1. Please leave premises as you found them. Lock doors, turn off lights and turn down heat/air conditioner (if applicable).
2. All equipment is to be in working order after being used. Should anything be found defective, repair charges will be levied on the applicant.
3. If selling liquor under an L.C.B.O. licence, a photocopy of the licence, along with proof of third party liability coverage with the Municipality as named insured, must be given to the Municipality prior to obtaining key.
4. A passcode will be provided for the east facing door to access the facility once payment has been received.
5. The Corporation of the Township of Limerick is not responsible for loss, damage or personal injury incurred during private functions.

RENTAL AGREEMENT

I (Name) _____ (Phone) _____
(Print Name)

I wish to rent the Limerick Community Centre and agree to the above conditions.

On _____
(Insert Date)

For the purpose of _____

Rental fee enclosed \$ _____ Date _____

Signature of Applicant

Municipal Representative

Please return to the Municipal Office with applicable fee;
89 Limerick Lake Road
Gilmour ON
K0L 1W0
clerk@township.limerick.on.ca

Updated: September 28, 2017

For Repairs or Issues related to the Facility please contact Kevin Simpson:
Phone Number: (613) 334-6104

Note: Form must be completed and returned prior to access to building. No early admittance is given for setup, decorating etc., Additional hourly charge applies.



**REQUEST FOR WAIVER OF RENTAL FEE
FOR THE LIMERICK COMMUNITY CENTRE**

Name of Organization: _____

Contact Person: _____

Telephone: _____ **Fax:** _____

Email Address: _____

Reason For Requesting Fee Waiver:

Date of Event: _____

Time of Event: _____ **# of Hours Required:** _____

Setup requirements: _____

Other Needs: _____

Please provide additional information that would assist Council in making a determination:

Signature: _____ **Date:** _____

INTERNAL USE ONLY

STAFF RECOMMENATION/COMMENTS: _____

LFC COMMENTS: _____

COUNCIL DECISION/ACTION: _____

RESOLUTION # _____