

CITY OF SENECA CITY HALL USE APPLICATION

Applicant:
Name:
Address:
Phone Number:

Event:	
Date of Event:	
Time of Event:	
Hours Needed (include set-up/clean-up):	
Type of Event:	
Approx # of People:	
Any Additional Requirements/Needs?	

I, the Applicant, understand I will be responsible for setting up, taking down, and cleaning for my event. I shall return any key I was given and ensure the City Hall is returned to its previous state. I also take responsibility for ensuring nothing in the building is damaged or destroyed during my event.

Rate: Use of Hall is free. First come, first served, by reservation only.

Applicant _____	Recorder _____
Date _____	Date _____