

SOUTHSIDE COMMUNITY CENTER

2142 Highway 77

Southside, Alabama 35907

Phone: (256) 442-0105

Email: communitycenter@cityofsouthside.com

RENTAL AGREEMENT

Printed Name: _____

Street Address: _____

City: _____ State: _____ Zip Code _____

Home Phone: _____ Work Phone: _____

Date Of Reservation: _____ Day: _____

Time:(From) _____ To: _____

I, _____, HAVE RESERVED THE SOUTHSIDE COMMUNITY CENTER, SOUTHSIDE, ALABAMA. I HAVE RECEIVED A COPY OF THE RULES AND REGULATION POLICIES AND UNDERSTAND I AM RESPONSIBLE FOR ANY DAMAGES WHICH MAY OCCURE BY THE USE OF THE COMMUNITY CENTER. I UNDERSTAND I MUST ADHERE TO THE RULES AND REGULATION POLICIES AS SET FORTH. I UNDERSTAND THE DEPOSIT WILL BE REFUNDED IF THERE HAS NOT BEEN ANY DAMAGES INCURRED. I UNDERSTAND IF THERE HAS BEEN DAMAGES INCURRED OR PROBLEMS WITH MY GROUP USING THE COMMUNITY CENTER IT WILL COME BEFORE THE SOUTHSIDE CITY COUNCIL TO RECTIFY THE PROBLEMS.

SIGNATURE: _____

APPROVED BY: _____ Date: _____

Rental Amount:\$ _____ Deposit Amount:\$ _____

Check Number: _____ Check Number: _____

Paid By Cash: Yes / No Paid By Cash: Yes / No

Receipt Number: _____ Receipt Number: _____

Date Paid: _____ Date Paid: _____

*These rules were adopted by the City of Southside Council on 3/9/2022.

Rev. 6/9/2022