



400 North Broad Street Summersville, WV 26651 304-872-1211

www.summersvillewv.org

RULES AND REGULATIONS

- Keys may not be duplicated or loaned to unauthorized individuals.
- The use of tobacco products is prohibited on within the City Building.
- No alcohol is permitted on City property at any time.
- After any event, the person renting the facility is responsible for the immediate removal of all food, beverage, and trash. Empty all trash cans including the ones in the restrooms. The dumpster is located across the street at the entrance to the employee parking lot.
- The floor must be swept after your event. If anything, sticky or messy is spilled, you must mop the floors. Cleaning supplies are provided for your use and are in the closet in the Ladies restroom.
- All chairs and tables should be wiped off and returned to where they originally were before the event.
- No items belonging to the City of Summersville are to be removed from the building. All broken, damaged, or missing items will be charged to the renting party at replacement cost.
- At the end of your event, you are required to call to have an inspection completed. If the facility is not returned to the way in which you found it, you are responsible for all costs involved. If you don't call for the inspection, you will be charged \$50.00 each day that the inspection is not made, and the key not returned. Please call _____ for the inspection.
- Please watch children associated with your event. Do not allow them to use the elevator without adult supervision.
- No one associated with your event is permitted in any areas of the City Building except rental and public use areas.

FEEs

- Rental fee is \$50.00 and is due when the key is picked up.
- In the event of cancellation, please call 304-872-1211 as soon as possible.

By signing below, I agree to indemnify and save harmless the City of Summersville of and from any and all injuries, including death, expense, claim, demand or cause of action of whatever nature arising from the undersigned's activities hereunder.

Name _____

Address _____

City/State/Zip _____

Phone _____

Organization _____

Signature _____

Date _____

Time _____

City Representative_____

Date_____