

**Village of North Aurora Activity Center Facility**  
**Room Rental Agreement**  
**1 N. Lincolnway, North Aurora, IL 60542**  
**Ph. 630-897-8228**

Dates(s) of Rental \_\_\_\_\_  
Time of Rental From: \_\_\_\_\_ a.m./p.m. To: \_\_\_\_\_ a.m./p.m.

Name of Family/Organization \_\_\_\_\_  
Person in Charge \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
(Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Email \_\_\_\_\_  
Alternate Contact \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Room Desired: GYM \_\_\_\_ Fireplace Rm. \_\_\_\_ Teen Center \_\_\_\_ Kitchen \_\_\_\_ Office \_\_\_\_  
Purpose of the Rental \_\_\_\_\_  
Estimated Number of Guests \_\_\_\_\_  
Tables and Chairs (amount needed) \_\_\_\_\_

This form is a request for room rental, not a contract. **Rooms will not be reserved until deposit payment is made and contract is signed** following the Village of North Aurora Room Rental Deposit Policy. Full payment will be due no later than 10 days prior to rental or contract is void and rental will be cancelled.

*All participants/guests in building for rental must follow the Village of North Aurora rental rules.*

**(Please sign below and bring your copy of this agreement on date of rental)**

The Village of North Aurora hereby agrees to rent facilities as listed above under the terms and conditions contained herein.

I \_\_\_\_\_, hereby represent that I am the duly authorized agent of the above stated organization and that I am empowered to execute this contract in its behalf, for the use of the Village of North Aurora premises and to bind such organization to the covenants and conditions of such leasing and contained in this agreement. The undersigned organization does hereby agree to abide by and does hereby warrant that all of its agents and guests, shall conform to all rules and regulations concerning use of the premises as established by the Village of North Aurora ( see room rental policy attached). The undersigned organization further does agree to indemnify and hold harmless said Village of North Aurora from and against any loss, damage, and/or liability occasioned by, coming out of, or arising or resulting from the use of the premises as provided herein. Upon approval of reservations, the rental fee shall be made payable to and forwarded to the Village of North Aurora, 25 south State Street in North Aurora, IL.

Attest: \_\_\_\_\_ Date \_\_\_\_\_

By (renter): \_\_\_\_\_ Date \_\_\_\_\_

**Deposit:** \_\_\_\_\_ **Rental Fee:** \_\_\_\_\_ **Rec'd by:** \_\_\_\_\_ **Refund:** \_\_\_\_\_