

APPLICATION FOR LIONS CLUB SHELTER RENTAL

TODAY'S DATE _____

DATE OF RENTAL _____

NAME: _____

ADDRESS: _____

PHONE: _____

CLUB OR ORGINATION: _____

IF CLUB OR ORGANIZATION, WHO IS RESPONSIBLE PARTY: _____

START TIME: _____ END TIME: _____

PURPOSE OF RENTAL: _____

NUMBER IN GROUP: _____

I UNDERSTAND AND AGREE THAT I CAN BE HELD RESPONSIBLE FOR ANY DAMAGE TO THE PROPERTY, AND THE MISUSE OF THIS PROPERTY MAY RESULT IN NOT BEING ABLE TO USE THE FACILITY AGAIN. I ALSO UNDERSTAND THAT THE ANDERSON COUNTY FISCAL COURT IS NOT RESPONSIBLE FOR ANY ACCIDENTS, INJURIES, ILLNESS OR LOSS OF GROUP OR INDIVIDUAL PROPERTY THAT MAY OCCUR.

SIGNATURE OF RESPONSIBLE PARTY: _____