

**Bessemer City Parks & Recreation**  
**Community Building Rental and User-Group Application**

Bessemer City Community Building 220 S. 14<sup>th</sup> Street, Bessemer City, NC 28016 Phone # 704-629-5111

This facility application must be completed and returned to the appropriate Community Building for all rental request and/or user-group request.

Applicants must read all relevant building information/procedures. Applicants must be 18 years of age or older.

Date Application Submitted \_\_\_\_\_

**Applicant Information**

Applicant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_  
Phone (Home) \_\_\_\_\_ Phone (Cell/Work) \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Rental Use Information**

Nature of Event \_\_\_\_\_

Date of Event \_\_\_\_\_

Time of Event - (choose one) - **All time requests include Room Set-up & Clean-Up.**

\_\_\_\_\_ 10:00 a.m. – 3:00 p.m. \_\_\_\_\_ 6:00 p.m. – 11:00 p.m.

Additional time requested (state time) \_\_\_\_\_ to \_\_\_\_\_

Total Number Persons Expected \_\_\_\_\_

What age group is the rental for? \_\_\_\_\_ 11 years or younger \_\_\_\_\_ 12-18 years \_\_\_\_\_ 18 years and older

Is this rental for a Non-Profit Organization? \_\_\_\_\_ Yes \_\_\_\_\_ No 501C \_\_\_\_\_ yes \_\_\_\_\_ no

Name of Organization (is applicable): \_\_\_\_\_ Federal ID#: \_\_\_\_\_

Will food be served? \_\_\_\_\_ If so, will a caterer be used? \_\_\_\_\_ yes \_\_\_\_\_ no Family/Covered Dish \_\_\_\_\_

Will there be a band or DJ? \_\_\_\_\_ yes \_\_\_\_\_ no

**Rental Time:** Your use of the facility is for the exact time you pay to rent. There is no time provided before to set up and no time after provided for cleanup. You must pay to rent the facility for these purposes. The community building will operate during regular hours and will only be open for outside rentals after hours and on weekends. **Extended rental time:** You may only pay to extend your rental time during regular operating hours. Extended hours must be paid for two weeks prior to your rental date.

Signature of Applicant \_\_\_\_\_

**Office Use Only**

Date Application Received \_\_\_\_\_ Total Rental Charges Assessed \_\_\_\_\_

Special Accommodations required? \_\_\_\_\_ Security/Police (Cost \$ \_\_\_\_\_) \_\_\_\_\_ Audio-Visual

Application Is \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fees: Security Deposit (\$100) Date Pd. \_\_\_\_\_ Receipt #: \_\_\_\_\_

Rental Fee: (\$250) Date Pd. \_\_\_\_\_ Receipt #: \_\_\_\_\_

Extra Time Fee (\$ \_\_\_\_\_) Date Pd. \_\_\_\_\_ Receipt #: \_\_\_\_\_

Deposit returned: Date: \_\_\_\_\_ Ck #: \_\_\_\_\_

Notes: \_\_\_\_\_