

Community Arts of Elmira Building Use Agreement

Name of Group, Organization or Individual:

Name of Person Responsible for Event:

Email:

Address of Group or Person Responsible:

Phone Number of Contact Person:

Building Use Cost:

Room(s) Requested:

Purpose of Use:

Date(s) Requested: _____ Times Needed: From to

Will Food be Served? _____ Beverages? _____ If yes, please specify. _____

Number of People Attending:

Special Requests (such as A/V equipment, seating, etc.)

By signature below, the above-named person agrees to be present during the entire event and will be available to CAE staff assigned to the event. In addition, the group, organization or individual does not hold CAE liable for incidents during use, and agrees to the usage terms on the attached document.

Signature

Date

● * * * * *

Submit signed copy of Agreement and check to:
Community Arts of Elmira
413 Lake Street
Elmira, NY 14901