

Waller County Community Center

Rental Application

Rental Date(s) _____

Renter Information:

Contact Person _____

Phone Number(s) Home _____ Cell _____

Address _____ City _____

State _____ Zip Code _____

Email _____ Organization _____

Type of Event _____

Adults Attending _____ # Minors Attending _____

Rental Times:

Arrival/Set- up _____ Event Start _____ Event End _____

***** All set-up and clean-up must be within rental time *****

Special Room Layout Requested ___ yes ___ no

Renter Providing Food at Event ___ yes ___ no

Reservations: Rental fees and a security deposit must be paid in full and a signed "Rental Agreement" must be submitted to secure a reservation. ONLY CASH AND MONEY ORDERS WILL BE ACCEPTED.

OFFICE USE ONLY:

Date Request Received _____ Received by _____

Payment Amount _____ Payment Date _____

Payment Received by _____