

**Potomac Curling Club/National Capital Curling Center  
Facility Rental Application**

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

Organization Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Event Date \_\_\_\_\_ Anticipated attendance \_\_\_\_\_

Event start time (including set-up) \_\_\_\_\_ Ending time (including clean-up) \_\_\_\_\_

Will food or beverages be served at this event?     Yes     No

During this event, attendees  will  will not use the ice for  curling  learning to curl

Number of attendees expected to be on the ice \_\_\_\_\_

I have read the Potomac Curling Club/National Capital Curling Center Facility Rental & Use Policy and, as the representative of the renting group or organization, agree to abide by the terms of that policy. As the representative of the group or organization renting the facility, I further assure that the facility and its furnishings will be left in a clean, orderly and undamaged condition at the close of this event. I also acknowledge that in the facility and its furnishings are not left in a clean and orderly condition, the cost of any additional cleaning will be deducted from the security deposit posted by my group or organization. Further, I acknowledge that the cost to repair any damage to the facility or its furnishings caused by my group or organization or any participant in this event will be deducted from the security deposit posted by my group or organization. Furthermore, I understand and agree that, if cost of additional cleaning and/or damage repair exceeds the sum of the posted security deposit, the additional cost will be billed to, and paid by, my group or organization.

\_\_\_\_\_  
Representative's signature

\_\_\_\_\_  
Representative's printed name

This application must be accompanied by non-refundable fifty-dollar (\$50.00) rental deposit.

Please make checks payable to: Potomac Curling Club, Inc.

For office use <input type="checkbox"/> Full Day rental @ \$_____ <input type="checkbox"/> Half-Day rental @ \$_____ <input type="checkbox"/> \$50 Rental deposit paid Number of instructors required _____ Payment of rental fee and \$150 security deposit due on or before _____ <input type="checkbox"/> Facility left in clean, orderly, undamaged condition. Checked by _____ <input type="checkbox"/> Security deposit refunded. Date _____ <input type="checkbox"/> Additional cleaning and damage charges billed. Date _____ <input type="checkbox"/> Paid Date _____
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