**Southwest Sublette County Pioneers**

**Senior Center**

**Guidelines for the use of the Senior Center Building**

1. The Senior Center will be available for funeral services. A contribution would be appreciated for the use of the building.
2. A $50-75 donation will be made to the Senior Center in advance for all meetings, small gatherings, etc. to be determined by the Director. Unless they are in compliance with the socialization of the Division of Aging. The Project Director will determine what consists of a meeting.
3. A donation of $100-500, will be made to the Senior Center in advance for all other functions, to be determined by the Director. Additional costs will be charged if you use our equipment, such as BBQ, Stove & Ovens etc. The Project Director will let you know of any additional costs prior to use of the building.
4. Areas that are off limits are the pool room, offices, food storage areas, and exercise room. If kitchen is being used it must be approved by the Director prior to the event.
5. Persons or organizations using the building will be held responsible for any damage or breakage which occurs while the building is in use.
6. The building will be left in the same condition in which it was found. Floors cleaned, dishes done, etc.
7. Absolutely no equipment is to be taken from the building under any circumstances unless it is checked out by the Director.
8. The Senior Center is not responsible for consequences direct or indirect from the consumption of alcohol on the premises.
9. A key to the building will be made available by the Director, and will be picked up [ not more than 24 hours prior to use of the building. Such key will be returned not more than 24 hours after the use of the building.

**I have read and understand these rules and I am willing to abide by them. I am not an employee of any department of the Southwest Sublette County Pioneers Senior Center.**

**Signed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I will be responsible for any underage persons attending my event when alcohol is served.**

**Signed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Staff signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Premium Coverage Recurring Payment**