

*SUPERVISOR*  
Catherine "Kay" Starostovic

*CLERK*  
Judy Martini



*TRUSTEES*  
Robert Hamm  
Robert "Bob" Selle  
Tom Lippert  
Karen Fischer

**GRANT TOWNSHIP**  
*Est. 1850*  
**Town Hall Private Rental Reservation Form**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Drivers License #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Type of Event: \_\_\_\_\_

Rental Date: \_\_\_\_\_ Time from: \_\_\_\_\_ am/pm Time to: \_\_\_\_\_ am/pm

Number of People Attending: \_\_\_\_\_ Stove Needed: (circle) YES NO

Number of Tables (6 people per table) needed: \_\_\_\_\_ Number of Chairs needed: \_\_\_\_\_

\_\_\_\_\_ **Receipt of Rules and Regulations sheet**

On the back of this page, please draw a diagram of how you would like tables & chairs set up in the hall. We will do our best to match your diagram.

Please note the hours of operation are 8 am – 11 pm. **The building MUST be vacated by 11:00 pm.**

I hereby request the use of the Town Hall on the date and time above, for the purpose stated. I acknowledge receipt of the rules governing the use of the Town Hall. I indemnify and hold the Township of Grant harmless for any damage, losses or costs (including Attorney's fee) that may arise from my use of the Town Hall.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Office Use

Key picked up by: \_\_\_\_\_ ID verified by: \_\_\_\_\_

Revised 4/1/2021