



**Town of Alpine**  
Alpine Civic Center Furniture Rental Form

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATES TO RESERVE: \_\_\_\_\_

\_\_\_\_\_

TYPE OF ACTIVITY: \_\_\_\_\_

LOCATION OF RENTED PROPERTY: \_\_\_\_\_

**INSIDE INCORPORATED LIMITS:**

Table - \$3.00 – Per Day:

Chairs - \$ .75 – Per Day:

**OUTSIDE INCORPORATED LIMITS:**

Table - \$5.00 – Per Day:

Chairs - \$1.25 – Per Day:

**MINIMUM** - \$50.00 DEPOSIT FOR TABLES AND CHAIRS – Two checks are required, one for your deposit and one for the rental amount. The \$50.00 deposit check will be given back when the furniture is returned in good order.

**RENTAL AMOUNT:**

\_\_\_\_\_ Table(s): \$ \_\_\_\_\_ RENTAL AMOUNT: \_\_\_\_\_

\_\_\_\_\_ Chair(s): \$ \_\_\_\_\_ RENTAL AMOUNT: \_\_\_\_\_

TOTAL RENTAL AMOUNT: \_\_\_\_\_ DEPOSIT AMOUNT: \_\_\_\_\_

AMOUNT PAID: \_\_\_\_\_

DATE DEPOSIT RETURNED: \_\_\_\_\_ AMOUNT RETURNED: \_\_\_\_\_

I \_\_\_\_\_, have rented the above number of tables/chairs and agree to take full responsibility for any damage done to the above tables and/or chairs.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_