

Eff. 6-9-10  
610-543-4565 fax: 610-543-8392

Mortonboro1@yahoo.com

**Borough of Morton**  
500 Highland Avenue-Morton, PA 19070

**\*WARNING -**  
**DURING SUMMER MONTHS-HALL IS NOT AIR CONDITIONED\***

**TODAY'S DATE** \_\_\_\_\_

**NAME** \_\_\_\_\_ **phone #** \_\_\_\_\_

**STREET ADDRESS** \_\_\_\_\_

**CITY, ZIP** \_\_\_\_\_

**DATE OF AFFAIR** \_\_\_\_\_

**TYPE OF AFFAIR** \_\_\_\_\_

**REQUESTED HOURS - FROM** \_\_\_\_\_ **A.M./P.M.** (please include total time  
from decorating to cleaning up)  
**TO** \_\_\_\_\_ **A.M./P.M.**

**TABLES & CHAIRS NEEDED?** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

**IF YES, HOW MANY TABLES** \_\_\_\_\_ **HOW MANY CHAIRS?** \_\_\_\_\_

**\*Boro can provide 16 tables**

**\*Boro can provide approx. 100 chairs**

**NUMBER OF PEOPLE** \_\_\_\_\_ (max. allowed = 100)

**FEES -PARTIES: \$50 per hour WITH \$150 Security Deposit-\*(no exceptions)**  
**BASKETBALL =\$25 per hr.** \_\_\_\_\_

**TOTAL PAYMENT DUE:\$** \_\_\_\_\_ **DEPOSIT RECEIVED:** \_\_\_\_\_

**BALANCE RECEIVED** \_\_\_\_\_

**COUNCIL APPROVAL SIGNATURE** \_\_\_\_\_

.....  
I/We understand that in being permitted to use the facilities of the Borough, that I/We are assuming the risk for any and all physical injuries to me, or any member of the organization, which such facilities are intended herein. In case of injury, I/we hereby waive all claims against the organizers, the sponsors, or any of the supervisors appointed by them, as well as the Borough of Morton, or any official employee thereof. I/we likewise release from responsibility any persons transporting myself, or us to or from the facilities. I/we understand that no alcoholic beverages are to be brought onto or upon the premises. As group head, I take responsibility for protecting the property from any damage while being used by our group and for cleaning the facility completely after use. Our group will pay for any maintenance necessary due to our use of the facility if it exceeds the normal maintenance. We understand that multiple noise violations will cause termination of event and loss of security deposit.

**Signature of Applicant** \_\_\_\_\_

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