## WAYNESBORO CITY AUDITORIUM RENTAL APPLICATION

714 Wayne Street Waynesboro, MS 39367 601-735-4874

This application must be completed to request use of the Waynesboro City Auditorium. The accuracy and completeness of the information provided below are very important in allowing your request to receive maximum consideration. Be as detailed as possible. Until this City Auditorium Rental Application is officially received in the City Clerk's Office of the City of Waynesboro and a formal Auditorium Use Agreement executed, there is no legal or binding commitment between the City of Waynesboro and the Applicant.

Applicant(s) Name:		Organization:	
Mailing Address:		City/State/Zip:	
Email Address:		Phone (Include Area Code):	
Cell (Include Area Code):		Fax (Include Area Code):	
Type of Event:			
Event Activities:			
Requested Date(s) and Time(s):	Date From:// at 8:00 a.m.	Date To:// at 8:00 a.m.	Total Days Requested:
Non-profit organization: ☐ YES ☐ NO		Number of Attendees Expected:	Name of Security Personnel:
Will event be open to the public: $\square$ YES $\square$ NO		Will you charge admission of any type: $\Box$ YES $\Box$ NO	
Will you be serving food at this event: □ YES □ NO Name of Caterer:			
Will you be having any type of entertainment at this event: □ DJ □ Band □ Other (If other is checked, please advise what type of entertainment/genre of music will be played).			
Microphone Use: □ YES □ NO		Sound System: ☐ YES ☐ NO	
If Required, Insurance Company Name: Policy Number:			
Applicant(s) signature:			
Date:			

RESERVATION OF AUDITORIUM IS NOT COMPLETE UNTIL AUDITORIUM USE AGREEMENT IS EXECUTED AND DEPOSIT IS RECEIVED IN THE CITY CLERK'S OFFICE.