

# **Orwigsburg Veterans Community Memorial Hall Request Form**

## **Address and Hours of Use**

- Location: 300 Grove St, Orwigsburg, Pa 17961
- The building is open daily between 8:00 a.m. and 10:00 p.m.
- Memorial Building will not be available for rent on any holidays.

## **Building & Kitchen Use**

- The Memorial Building has a seating capacity of up to 300 people. A state-of-the-art audio/visual system can handle all your music and video needs. There is a full kitchen available for caterers to use, with easy access for unloading.
- The Memorial also has a full-sized court for sports events.
- There is ample parking located adjacent to and across the street from the building.
- Renters are responsible for all people attending their function.
- Please clean up any spills on the floors or on the tables. The kitchen areas should be left as found.

## **Rules and Regulations**

- Applications and deposits are due to reserve a date.
- Certificate of Insurance must be submitted with application naming the Borough of Orwigsburg as additional insured, no later than two (2) weeks prior to the event to avoid any cancellations.
- Use of the Kitchen is an additional fee. All food must be removed from refrigerators after your event, or it will be disposed of. No storage, even if you plan to return for multiple events.
- Accepted forms of payment: Cash, Check, or Money Order made payable to “Orwigsburg Borough”
- Cleanup is expected to be done by the group and will affect future rental to the same group and/or members of that group.
- If rental crosses year end, rentals will follow any price changes in new year.
- No alcoholic beverages are allowed unless specific permission is given by the Borough (insured & liquor license)
- If claiming non-profit, a 501c3/tax exemption letter must be presented with application.
- Tables and chairs are accessible upon request, the Borough does not assist with set-up.
  - If set up/ tear down assistance is needed, there will be an additional \$200 fee.

***ISSUES: Please contact the Orwigsburg Police Department @ 570-366-3101  
if no answer - County Comm. Center @ 570-628-3792.***

***Your feedback is welcomed. Please contact the Borough @ (570) 366-3103 with your comments.***

# VETERANS MEMORIAL BUILDING FEE SCHEDULE

## Memorial Gym Rental

## Fee:

### *Within the Borough:*

Service groups/Non-Profit

\$25/hour, \$250 per day

Other groups/ Individuals

\$30/hour, \$300 per day

### *Outside the Borough:*

Service groups/Non-profit

\$100/hour, \$800 per day

Other groups/ Individuals

\$150/hour, \$1,000 per day

## **ADD ON SERVICES:**

Kitchen

\$75 per hour; \$600 per day

No charge for service area ONLY

Audio/Visual System

\$300 per event/day

## Large Conference Room:

### *Within the Borough:*

Non-Profit/Service Groups

\$25/hour, \$160 per day

Other groups/Individuals

\$30/hour, \$200 per day

### *Outside the Borough:*

Non-Profit/Service Groups

\$50/hour, \$300 per day

Other groups/Individuals

\$60/hour, \$500 per day

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## **DEPOSITS:**

- A \$100 cleaning deposit will be charged for each event. The deposit will be returned (3 business days) if the facility is found to be clean upon a post event inspection.
- \$100 kitchen cleaning deposit- refundable (3 business days) if after inspection the kitchen is found to be clean.
- \$250 audio/visual system security deposit to cover damages- refundable (3 business days) if after inspection A/V system is found to be in good condition and working order.

**Your reservation is not official until form is submitted to the Borough Office**

**Orwigsburg Borough  
333 S Liberty St  
Orwigsburg, Pa 17961  
570-366-3103**

**e-mail: [secretary@orwigsburg.gov](mailto:secretary@orwigsburg.gov)**

### **Veterans Community Memorial Hall Request Form**

Date \_\_\_\_\_ Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

Name of Organization/Individual \_\_\_\_\_

Address \_\_\_\_\_

Activities Scheduled \_\_\_\_\_

Reservation Dates(s) Requested \_\_\_\_\_

Reservation Times(s) Requested \_\_\_\_\_

Actual Start & Finish Time of Event \_\_\_\_\_

Do You Have Any Other Special Arrangements, Requests, or Things We Should Know?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_ Will the kitchen be needed? Full function or Service area?

Yes \_\_\_\_\_ No \_\_\_\_\_ Will the Conference Room be needed?

Yes \_\_\_\_\_ No \_\_\_\_\_ Will the Audio/Visual system be needed?

Yes \_\_\_\_\_ No \_\_\_\_\_ Will the Gym/Court be used?

Yes \_\_\_\_\_ No \_\_\_\_\_ Will the Bleachers be needed?

Yes \_\_\_\_\_ No \_\_\_\_\_ Will you need tables and chairs?

Yes \_\_\_\_\_ No \_\_\_\_\_ Non-Profit? *(a copy of a 501c3 must accompany this application)*

Yes \_\_\_\_\_ No \_\_\_\_\_ Will you be charging an entry fee?

Yes \_\_\_\_\_ No \_\_\_\_\_ Are you holding this event for profit?

Yes \_\_\_\_\_ No \_\_\_\_\_ Is the Group/Individual Covered by Liability Insurance?

*(Certificate of Insurance at a minimum of one (1) million-dollar coverage)*

**Notice: A certificate of insurance must be attached naming the Borough of Orwigsburg as the certificate holder**

## **Agreement with Orwigsburg Borough for Use of Borough Facilities**

The undersigned, for and on behalf of the organization and activity designated above, consider for the use of Orwigsburg Borough property and/or facilities agree that the said organization shall be responsible to the Borough of Orwigsburg for any damage, excess cleaning charges and/or any other property of the Borough which is destroyed or misused. The undersigned agrees to make payment in full to the Borough of Orwigsburg within thirty (30) days of receipt of an invoice for damage or repairs. Further, the undersigned agrees to hold the Borough of Orwigsburg harmless from any liability for any personal injuries or property damage resulting from the activities being held by the organization or individual.

**Payment and Certificate of Insurance** for scheduled events/activities is due no later than two (2) weeks prior to event to avoid cancellation by the Borough. Payment is not subject to be refunded. The undersigned also acknowledge that they will inform the Borough **in writing** of any changes and/or cancellations. See attached fee schedule.

### **For the Organization/Individual**

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Name (Signature)

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Phone Number

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Official Position

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### **For the Borough: Orwigsburg Recreation Commission**

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Name (Signature)

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Phone Number

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Official Position

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For Orwigsburg Recreation Commission Use Only:

Approved \_\_\_\_\_

Not Approved \_\_\_\_\_