

Soldiers Memorial Sports Arena (SMSA) Use Application – Meeting Rooms

Facility Address: 416 24th Street / Butner, NC 27509

Date: _____

Reservation Information

Date(s): _____ Time(s): _____

Name of Organization: _____ Age(s): _____

Organization Location: _____

Type (Circle one): Birthday Baby/Bridal Shower Meeting Other

Number of Rooms Needed (Circle one): 1 2 3

PLEASE NOTE: Chewing gum is not allowed. Frying of any kind and the use of hot plates are not permitted. Please see the Rules for a complete list of what is or is not allowed under your license agreement.

Applicant Information

Name: _____

Organization affiliation (director, coach, etc.): _____

Address: _____

City/State/Zip: _____

Telephone: _____

E-mail Address: _____

Refundable Deposit

Deposit Amount: \$250.00

The Town reserves the right to withhold a portion, if not all, of the deposit for violation of rules and if any of the following are present during the post-license period inspection.

Gum (floors, bleachers, restrooms, etc.)

Spills Not Cleaned Up

Trash (not emptied or placed in dumpster)

Bathrooms Left Unclean

Damage to Bathrooms

Damage to Building (interior or exterior)

Damage to Equipment

Other

Applicant Signature: _____ Date: _____

Deposit: _____ Paid: Y N Refund Deposit: Y N

Fee(s): _____ Paid: Y N Violation(s): _____

Rules Signed: Y N _____

Certificate of Insurance Submitted: Y N _____

Minimum 2 References Submitted: Y N References Approved: Y N

Additional Fee(s): _____

Additional Requirements: _____

Staff Signature: _____ Date: _____