



**BUCKHANNON COUNTRY CLUB
FACILITY RENTAL APPLICATION**
(Please print & use Black or Blue Ink)

EVENT DATE: _____ DAY OF WEEK: _____

GUESTS: _____ (max. 80 people indoors or up to 100* people with some set-up outdoor) *weather dependent

TYPE OF EVENT/DESCRIPTION: _____

FACILITY RENTAL REQUEST

Circle Areas of Request

BANQUET ROOM: YES NO **GRILL ROOM:** YES NO
KITCHEN/EQUIPMENT: YES NO **SERVICE WARE:** YES NO
BARTENDER: YES NO **ADD'L ATTENDANT:** YES NO
MOVING/SET-UP FEE: YES NO **LINENS:** YES NO

COMMENTS: _____

COORDINATOR NAME (RENTER): _____
(Person legally authorized to rent facility)

BUSINESS NAME: _____

ADDRESS: _____ CITY: _____ ST: ___ ZIP: _____

PHONE 1: _____ PHONE 2: _____

EMAIL: _____ FAX: _____

HOURS OF EVENT: _____ AM/PM to _____ AM/PM

SET UP TIME: _____ AM/PM CLOSE UP TIME: _____ AM/PM

COMMENTS: _____

I have read and agree to all terms contained within the Buckhannon Country Club Rental Agreement.

RENTER SIGNATURE

DATE

(Buckhannon Country Club Office Use Only)

FACILITY DEPOSIT RECEIVED: \$ _____ DAMAGE DEPOSIT RECEIVED: \$ _____

COMMENTS: _____

SIGNED: _____
(BCC REPRESENTATIVE)

DATE