



Town of Mt. Jackson

P.O. Box 487
5901 Main Street
Mt. Jackson, Virginia 22842-0487
Tel: (540)477-2121 Fax: (540)477-2351

Town Hall Lower Level Conference Room/Equipment Request-Use Agreement

Name of Organization: _____ Date: _____
Contact person: _____ Title: _____
Phone : _____ email: _____
Requested Dates/times: _____
Photo ID: Name: _____ ID #: _____
Deposit: \$125.00 Check # _____

Requirements for use: Please initial

___ I agree to use the Conference Room and electronic equipment in a responsible and respectful manner being certain to follow the supplied instructions for use and making sure to turn off all equipment after use.

___ I understand that this equipment has a monitoring program attached to it that the Town of Mount Jackson will supervise. Irresponsible use of the internet or any portion of this equipment will result in consequences which will include forfeit of the \$125.00 deposit as well as the filing of a police report.

(Irresponsible use includes damage to the equipment, intentional tampering of town equipment, surfing the internet on sites that include pornography or any illegal sites.)

___ I understand that I will leave the room as I found it, clean of trash with all furniture being placed back where it was found.

Signature _____

Approved _____

Date _____

Town Signature _____

Thank you,

Charles K. Moore
Town Manager

