

RENTAL APPLICATION OF TOWN HALL

TOWN OF MACKFORD

N2270 County Road A

Markesan, WI 53946

(608) 297-0107

kmehn@townofmackfordwi.gov

Renter Type –Town resident/property Owner: \$75.00

Date Requested: _____ Time (approximate): from _____ to _____

Name of Group or Organization: _____

Name of person responsible: _____

Address: _____

City

State

Zip

Telephone #: _____ E-mail address: _____

Type of function to be held: _____

Number of people expected at function: _____ (The hall has a seating capacity of 70)

What items will be brought into the hall for the activity: _____

Signature of applicant: _____ Date: _____

Signature of Clerk: _____ Date: _____

_____ Hold Harmless Agreement signed **required for all rentals**

_____ Rental Amount \$ 75.00 _____

Key returned within 3 days to Town Clerk--- Date: _____

Effective 1/1/2021