



allUS Credit Union Community Room Usage Agreement

Please Complete the Application Section and bring it with you when you come to make your deposit and pickup your key. Be sure you have confirmed reservation before proceeding.

Application Section

Organization / Business Name:

Contact Name:

Wk/Home Phone:

Cell / Mobile:

E-mail Address:

Number of individuals expected at event:

Date of event

Description of Event:

Person responsible Contact information for Opening and Closing if not same as above:

Responsible Name:

Wk./Home Phone:

Cell / Mobile:

E-mail Address:

Key \$25 and Cleaning Deposit \$50.00 and Usage fee:

Total:

Check: or Cash:

\$50 Non-Profit Fee may be waved on request submit e-mail with request and why to communityroom@alluscu.com

Acceptance Section

Funds Received by: Customer Rep: _____

Scheduled by Customer Rep: _____

Signature Below indicates acceptance of Requirement to clean up after use, acceptance of key and requirement to return key within 2 business day of last day of usage. Verify laptop and phones are in original condition.

Key Receiver's Printed Name: _____

Signature: _____