

Windsor Recovery Club Room Rental Agreement

Circle one of the following:

This application is for a SINGLE EVENT or MONTHLY RENTAL (Weekly or Monthly)

Name of Organization/Meeting: _____

Date(s) of Event: _____

Responsible Contact Person: _____

Telephone: _____

Single Event Rental Price:

Main Hall \$100

Monthly Rental Prices:

Meeting Hall \$100

Upstairs Room \$50

Angel Room \$50

I/we agree that I/we indemnify and hold the Recovery Club, Inc. from any damages or liability that may arise from the activities taking place during the rental period specified herein.

I/we have read the rules and regulations and agree to abide by them and I/we agree to the terms of this contract. I/we understand that non-compliance with the rules and regulations may result in losing the opportunity to use the Recovery Club.

Signed: _____ Date: _____

Drop payments off in bookstore door
slot or mail to:

The Recovery Club
P.O. Box 1058
Windsor CT 06095

(Make sure your group name and contact
person's # is included with your payment)

If you have any questions, please call 860-285-0016