

REQUEST FOR USE OF DENTON COUNTY FACILITIES

Facility Requested: _____

Date Requested: _____

I would like to have the facility open at _____, and closed at _____.

The facility will be used for the following purpose(s): _____

_____.

It is hereby understood and agreed that the below named individual or organization(s) will assume responsibility for the repair or replacement of any Denton County premises and/or equipment which might be damaged during the license period. It is also understood that the security deposit may be forfeited for failure to comply with the Denton County Building Use Policy.

Licensee: _____

Signed by: _____

(Organization Liaison - Signature and Printed Name)

Address, CSZ: _____

Phone Number: _____

Rental Fee: _____ Deposit: _____

Please return forms and fees to: Denton County, Aide-to-the-Court, 110 W. Hickory St.,
Denton, TX 76201

Date Received: _____ By: _____

Agenda date: _____ Approved/Unapproved

Special Requirements: _____