

City of Glenarden



GOLD ROOM POST-EVENT CHECKLIST

Date of Event: _____ Event Time: _____

Type of Event: _____

Renter's Name: _____

Date and Time of Walk-Through: _____

City Representative Conducting Walk-Through: _____

Were there any damages? YES / NO (If yes, describe) _____

Did event conclude on time? YES / NO (If no, what time) _____

Did event participants vacate the premises on time? YES / NO

Were Gold Room and kitchen left in "broom clean" condition? YES / NO

Is excessive clean-up required? YES / NO (If yes, describe) _____

Were tickets sold at the door or on the premises of the Gold Room Facility? YES / NO

- The City Manager will notify the renter in writing if there are any damages or violations and any fees to be assessed.
- As the renter of the Gold Room for the above named event, I have participated in the post-event walk through. Of damages or violations are noted above, I agree to all applicable fees/and penalties.

Renter: _____ Signature: _____
(Print Name)

City Representative: _____ Signature: _____
(Print Name)