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| FOB #: _____ Return Date: _____ |
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KEYFOB ACQUISITION AGREEMENT

All keys to the Cheverly Community Center are the property of the Town of Cheverly and must be returned to the Town upon demand.

Name: _____ **Phone:** _____

Address: _____ **Alternate Phone:** _____
 Cheverly, MD 20785

Organization: _____

- I hereby agree **NOT TO LOAD OR DUPLICATE** the keyfob provided to me by the Town of Cheverly for access to the Cheverly Community Center.
- As duly authorized by the above-named organization to accept this keyfob, I assume full responsibility for opening and closing the building for that group's sponsored events, when a town staff member is not present.
- I also understand that I may not use this keyfob to access the Community Center building for my own personal use, and that violation of this agreement will result in the repossession of the keyfob by the Town of Cheverly.
- I understand that I **MUST** report the keyfob as lost or stolen within 24 hours.

Date: _____

Signature of Keyfob Recipient

| | SUNDAY | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY |
|-----------------|--|--------|---------|-----------|----------|--------|----------|
| Hours Requested | | | | | | | |
| Begin Date | Copy of Insurance provided to the Town? Yes No | | | | | | |
| End Date | | | | | | | |

Date: _____

Signature of Town Official

Approved Access to: _____

PLEASE REMEMBER:

- ❖ *AS A CHEVERLY RESIDENT, THIS IS YOUR COMMUNITY CENTER. YOUR TAX DOLLARS BUILT IT AND MAINTAIN IT. PLEASE TAKE CARE OF IT AND LOOK AFTER IT AS YOU WOULD ANY OF YOUR OTHER VALUABLE POSSESSIONS.*
- ❖ *BE RESPONSIBLE, BE A LEADER. IF YOU SEE SOMEONE ABUSING THE BUILDING OR GROUNDS, PLEASE NOTIFY STAFF*
- ❖ *TALK TO YOUR ORGANIZATION, TEAM, OR COMMITTEE. IMPRESS UPON THEM AS WELL THE NEED TO RESPECT AND LOOK AFTER THE BUILDING.*
- ❖ *ENJOY THE COMMUNITY CENTER!*