

Town of Sherman
Rental Agreement, Town Hall, Tables and Chairs

Responsible Party: Name: _____

Address: _____

Phone: _____

Email: _____

Items needed: Town Hall _____

of Tables needed: _____

of Chairs needed: _____

Dates needed: From: _____

To: _____

Sherman Resident: Yes _____ No _____

If tables and/or chairs are going to be used outside the Town of Sherman, specify
Intended location of use:

Rental Fee \$ _____

Deposit \$ _____

Signature: _____