

EDWARD L. "PEEL" COLEMAN COMMUNITY CENTER
1400 Sherrick Rd. S.E.
Canton, Ohio 44707
(330) 489 – 3350

Reservation Request Form

Name of Organization _____

Contact Person _____

Mailing Address _____

Email Address _____

Phone _____ Alternate Phone _____

Date(s) of Event _____ Time From: _____ To: _____

Number of People in attendance _____

Purpose: _____

*40% off rentals for non-profit organization with documentation of non-profit status.

Please Check Requested Space for up to four (4) hours:

_____ Community – \$100.00	_____ Training – \$ 75.00
_____ Arts / Craft – \$50.00	_____ Dance / Music – \$ 50.00
_____ Game Room Area – \$150.00	_____ Kitchen – \$ 50.00
_____ Gymnasium – \$220.00 (back) \$335.00 (front) \$450.00 (whole)	_____ Community Room and Kitchen – \$150.00
	_____ Conference Room – \$10.00 per hour

*All rooms require non-refundable \$50.00 deposit

Hourly Rate

_____ Whole Gym \$100.00
_____ Front of Gym \$75.00
_____ Back of Gym \$50.00

Seasonal/Annual Rate (Max. 48 days for three (3) hours per day)

_____ Whole Gym \$1,000
_____ Front of Gym \$750
_____ Back of Gym \$500
_____ Lockers \$5.00/month
_____ Other Determined at time of agreement

Number of tables needed _____ Number of chairs needed _____ Other _____

Floor plan confirmed _____ Yes _____ No

Staff Initials _____

**Floor plan must be confirmed at least one week prior to scheduled event. Please draw your floor plan design on the back of this request form.*