



**City of Rockdale, Texas**  
**George Hill Patterson Community Center**  
**Reservation Form**

I hereby acknowledge receipt of the Rules and Regulations for the Civic Center and accept responsibility for the adherence to the rules. **Lessee must be 21 years of age and provide a Texas Driver's License or Texas I.D. along with this reservation form.**

Facility rental payment must be made at least 30 days prior to the date of the event. A deposit is required at the time of the reservation request and will be refunded if the facility is left undamaged and clean after the event. To receive a full deposit refund, written notification of cancellation must be provided at least 3 months prior to the date of the event.

Lesse Name (print): _____	Date: _____
Address: _____	Phone: _____
City: _____ State: _____	Zip: _____
Email: _____	DL/ID# _____

Lessee signature: \_\_\_\_\_

Type of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_

*Check all that apply*

☐ Deposit \$250      ☐ Decorating day prior (after 6PM) \$150      ☐ Clean Up day after \$150  
*(Return Key by NOON)*

☐ Full Day- \$375 (Mon-Thurs)      ☐ Professional Cleaning Service \$150

☐ Full Day- \$650 (Fri-Sun)      ☐ Non-Profit (IRS Certified)- ½ adopted fee

☐ Half Day- \$200 (Mon-Thurs)      ☐ Continuous Use (6 Month min, 4 hr max) \$250/month

☐ Half Day- \$400 (Fri-Sun)

*Select one below*

☐ 6 AM to 12 NOON

☐ 12 NOON to 6 PM

☐ 6 PM to 12 MIDNIGHT

FOR CITY USE ONLY

Request Received by: \_\_\_\_\_ Date: \_\_\_\_\_

**EVENT FEES:**

Total Amount \$ \_\_\_\_\_ Due by \_\_\_\_\_

Deposit Amount \$ \_\_\_\_\_ Paid on \_\_\_\_\_

Cleaning Service \$ \_\_\_\_\_

Paid by \_\_\_\_\_

Method \_\_\_\_\_

Key Returned: DATE: \_\_\_\_\_ Time: \_\_\_\_\_

Post Event Inspection by: \_\_\_\_\_ Date: \_\_\_\_\_

DEPOSIT REFUND:    ☐ NO            ☐ YES, Amount due \$ \_\_\_\_\_

Comments: