



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Pharr Family YMCA Rental Contract

Date of Scheduled Event: _____ Type of Event: _____

Start/End Time: ____/____ This time includes set up and clean up.

Deposit Amount: \$100.00 (Must be paid to reserve date) Date Paid: _____

of Guests _____ Facility Fee* \$100 Y/N Date Paid: _____

- At the time of event if there are more than 75 guests & Facility Fee has not been paid applicant forfeits their \$100 deposit*

Member Rate is for YMCA member/McAdenville Resident/Pharr Employee's only

- Hourly pricing # _____ hrs. Total due: _____
- Full Weekend Price: _____
- School Dance Price: _____

Y Staff fill in correct pricing place N/A if not using the pricing choice.

All Fees are to be paid in full 2 weeks prior to event

I understand that the cancellation of this agreement must be done no later than 45 days prior to the event date to receive a refund on my deposit. All cancellation and deposit refunds will be processed through the YMCA Corporate Office and may take up to 14 days. (initial)

Name of Contracting Party: _____ DOB: _____

(Contracting Party must be present all contracted hours)

Address: _____ City: _____

State: _____ Zip: _____ E-mail: _____

Home #: _____ Cell#: _____

PHARR FAMILY YMCA
208 Main Street – McAdenville, NC 28101
Phone: 704.824.1131

OUR MISSION
To put Christian principles into practice through programs
that build healthy spirit, mind, and body for all.



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Initials and signature must be completed on back of this contract for event to be reserved.

- Tables, Chairs, and Kitchen appliances are a courtesy and not guaranteed for this event. [](initial)
- I, [] accept full responsibility for the use of the William J. Pharr Family YMCA Ballroom/Kitchen and will abide by YMCA Rules and Regulations as posted. I will not allow any guests to enter/use the Gymnasium or Fitness Room. [](initial)
- I am responsible for items missing and/or for any damages incurred during my use of the Pharr Family YMCA. I will ensure that the facility will be left in the same condition it was found. [](initial)
- I understand there is NO Smoking or use of Alcohol or drugs in the facility and/or on the grounds. [](initial)
- Do not remove any dishes or utensils from kitchen or any fixture from facility. [](initial)
- No Parking on the front patio of the building at any time. [](initial)
- Contracting party responsible for upholding all Rental & Housekeeping policies. [](initial)
- Any outside entertainment brought into facility is the responsibility of the contracting party. [](initial)
- I hereby release the Gaston County Family YMCA, the McAdenville Foundation, and Pharr Yarns, Inc., from any liability and waive any right to recovery, I may have, as a result of any injury, I or any member of my party, may incur, while at the Pharr Family YMCA. This includes any medical costs incurred as a result of injury, while present at the YMCA. [](initial)

Contracting Party Signature: _____ Date: _____
Pharr Family YMCA Signature: _____ Date: _____