



# CITY OF APPLE VALLEY

## Parks & Recreation Department

952/953-2300

mailing address: 7100 - 147<sup>th</sup> Street West, Apple Valley, MN 55124  
office location address: 14603 Hayes Road, Apple Valley, MN 55124  
952/953-2300

GROUP/ORGANIZATION \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

ZIP \_\_\_\_\_

### PARK SHELTER BUILDINGS

- A.V. East @ \$60/day + deposit
- Delaney @ \$60/day + deposit
- Galaxie @ \$60/day + deposit
- Hagmeister @ \$60/day + deposit
- Huntington @ \$60/day + deposit

### PICNIC SHELTERS

- Farquar Hilltop @ \$60/day
- Farquar East @ \$40/day
- Farquar West (Pilot Knob) @ \$40/day
- Redwood by ballfield @ \$40/day
- Redwood by parkinglot @ \$60/day
- Alimagnet @ \$40/day
- Lac Lavon @ \$60/day

### OTHER

- Chuckwagon Cooker @ \$20/day + \$25 deposit
- Picnic Equipment @ \$25 deposit
- Restroom Key @ \$25 deposit  
(available before Memorial Day  
and after Labor Day)

RESERVATION DATE DESIRED \_\_\_\_\_

TIME OPEN \_\_\_\_\_

TIME CLOSE \_\_\_\_\_

PURPOSE \_\_\_\_\_

APPROX. NUMBER OF PEOPLE \_\_\_\_\_

*As lawful consideration for being permitted to use the park shelter/building, belonging to the City of Apple Valley, I on behalf of myself, and/or the \_\_\_\_\_ corporation - organization - association, agree that the City of Apple Valley shall be held harmless and will not be liable for any injury or disability which I or any member, employee or participant of the said corporation - organization - association incur as the result of use of said facility due to the passive or active negligence of the city, its agents or employees. This release of liability of the City of Apple Valley does not include any injuries that I or any member, employee or participant of the said corporation - organization - association incur as the result of willful, wanton or intentional misconduct by the City of Apple Valley, its agents or employees. This agreement is specifically binding on my spouse, heirs and assigns, and the spouses, heirs and assigns of any member, employee or participant of the said corporation -organization - association.*

*I warrant that I am authorized to enter into this Agreement on behalf of said corporation -organization - association.*

TODAY'S DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_ PHONE (home) \_\_\_\_\_ (work) \_\_\_\_\_

\*\*\*\*\* lower portion information for staff use \*\*\*\*\*

Staff approval _____	Date _____	DATE DEPOSIT PAID _____	BALANCE AMOUNT DUE _____
_____ rental unit(s) x \$ _____ = \$ _____		DEPOSIT AMOUNT _____	DATE BALANCE PAID _____
_____ damage deposit \$ _____	total amount due \$ _____	CASH/CREDIT CARD _____	CASH/CREDIT CARD _____
		RECEIPT NUMBER _____	RECEIPT NUMBER _____

10% of the rental fee is non-refundable

*\$25.00 damage deposit for picnic equipment is due when you pick up the equipment at the Apple Valley Community Center.*