

# 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: Apple Valley Community Center, 14603 Hayes Road

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

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

EMAIL ADDRESS \_\_\_\_\_

MAIL ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (home) \_\_\_\_\_ (work) \_\_\_\_\_

(cell) \_\_\_\_\_ Cell Service Carrier \_\_\_\_\_

(For communication regarding your reservation via text message.)

Facility/Room/Gym Requested: \_\_\_\_\_

DATE DESIRED \_\_\_\_\_ TIME OPEN \_\_\_\_\_ TIME CLOSE \_\_\_\_\_

PURPOSE \_\_\_\_\_ NUMBER OF PEOPLE \_\_\_\_\_

NO. OF TABLES REQUESTED \_\_\_\_\_ NO. OF CHAIRS REQUESTED \_\_\_\_\_

SPECIAL REQUESTS \_\_\_\_\_

### GUIDELINES

- Check in with the building supervisor upon arrival and departure. Group leaders are responsible for cleaning the facility after their group's usage. Please return the facility back to the original condition in which you found it.
- All renters must dispose of waste in proper trash and recycling receptacles provided at the facility.
- Groups must adhere to the starting and ending times, and use only those facilities/room(s) specified on the permit.
- Group leaders are responsible for the conduct of both participants and spectators. Adequate supervision must be provided by the applicant.
- Applicant may not sublet or transfer their rights or privileges to any individual, group or organization.
- The Parks and Recreation Department may require the applicant and/or organization to furnish a certificate of insurance and/or damage deposit in addition to the rental fee.
- Inclement weather, building emergency, or rescheduling of Recreation programs may necessitate a change or cancellation of this reservation.

THIS IS A NO SMOKING-NO ALCOHOL BUILDING

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

TODAY'S DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

\*\*\*\*\*lower portion for staff use only:\*\*\*\*\*

\_\_\_\_\_ Room(s) x \_\_\_\_\_ Hours(s) = \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Damage Deposit = \$ \_\_\_\_\_ TOTAL AMOUNT DUE \$ \_\_\_\_\_

Receipt of Request Date: \_\_\_\_\_ Staff Initials: \_\_\_\_\_