

**CITY OF LAKE MILLS**  
**COMMUNITY CENTER USE APPLICATION**

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

1. NAME \_\_\_\_\_

2. ORGANIZATION \_\_\_\_\_

3. ADDRESS \_\_\_\_\_  
\_\_\_\_\_

4. TELEPHONE (HOME) \_\_\_\_\_

5. TELEPHONE (WORK) \_\_\_\_\_

6. DATE(S) REQUESTED \_\_\_\_\_

7. START SET-UP TIME \_\_\_\_\_

8. END CLEAN-UP TIME \_\_\_\_\_

9. TYPE OF EVENT \_\_\_\_\_  
\_\_\_\_\_

10. ESTIMATED NUMBER OF GUESTS/ATTENDEES \_\_\_\_\_

11. FACILITY REQUESTED (CHECK ALL APPLICABLE):

- \_\_\_\_\_ HALF COMMUNITY CENTER (RM 157)
- \_\_\_\_\_ ENTIRE COMMUNITY CENTER (RM 157)
- \_\_\_\_\_ KITCHEN FACILITIES (RM 155)
- \_\_\_\_\_ FIRST FLOOR LOBBY (RM 102)
- \_\_\_\_\_ CONFERENCE ROOM (RM 103)
- \_\_\_\_\_ CONFERENCE ROOM (RM 231) [MEETINGS ONLY]
- \_\_\_\_\_ CONFERENCE ROOM (RM 239) [MEETINGS ONLY]
- \_\_\_\_\_ COUNCIL ROOM (RM 233) [SPECIAL REQUEST, CITY MANAGER APPROVAL REQUIRED]
- \_\_\_\_\_ OUTDOOR TERRACE

12. NUMBER TABLES REQUIRED \_\_\_\_\_  
(6 INDIVIDUALS PER TABLE)

13. NUMBER CHAIRS REQUIRED \_\_\_\_\_

14. WILL ALCOHOLIC BEVERAGES BE SERVED? YES \_\_\_\_\_ NO \_\_\_\_\_

15. ITEMS/EQUIPMENT REQUESTED: (Sanctioned events/users pay no equipment rentals)  
\_\_\_\_\_ Microphone/PA system No Charge \_\_\_\_\_ 12" Punch Bowl/Ladle (Qty 2) No Charge

Users renting rooms are charged a rental fee on equipment below

\_\_\_\_\_ Video/PC Projector & Cart (Qty 2) \$10each \_\_\_\_\_ Coffee Pot 55 Cup \$5

\_\_\_\_\_ Portable Screen \$5 each \_\_\_\_\_ DVD & TV/PC Monitor 19" \$5

\_\_\_\_\_ DVD & TV/PC 42" Monitor on cart \$10 \_\_\_\_\_ Cassette Recorder \$5

\_\_\_\_\_ 35 MM slide projector \$5 \_\_\_\_\_ Overhead Projector (not video) \$5 each

**I HAVE RECEIVED A COPY OF COMMUNITY CENTER POLICIES AND PROCEDURES AND AGREE TO ABIDE BY THE SAME.**

\_\_\_\_\_  
Signature of Applicant

16. FEES: TO BE COMPLETED BY COMMUNITY CENTER COORDINATOR (not applicant)  
AT TIME OF RESERVATION

\_\_\_\_\_ ROOM RENTAL FEES

\_\_\_\_\_ EQUIPMENT RENTAL FEES

\_\_\_\_\_ \$25.00 OPEN/CLOSE FEE

\_\_\_\_\_ SALES TAX \_\_\_\_\_ HOURLY CHARGES (IF REQUIRED)

\_\_\_\_\_ **SUBTOTAL**

\_\_\_\_\_ SENIOR/YOUTH 10% DISCOUNT

\_\_\_\_\_ **SUBTOTAL**

\_\_\_\_\_ STANDARD RESERVATION FEE

\_\_\_\_\_ ALCOHOL DEPOSIT FEE

\_\_\_\_\_ **TOTAL DEPOSIT FEES**

17. ACTUAL COSTS/FEES (TO BE COMPLETED BY COMMUNITY CENTER COORDINATOR UPON COMPLETION OF EVENT)

_____	TOTAL DEPOSIT RECEIVED
_____	ROOM RENTAL FEES
_____	EQUIPMENT RENTAL FEES
<u>\$25.00</u>	OPEN/CLOSE FEE
_____	HOURLY CHARGES
_____	CLEAN-UP FEES
_____	DAMAGE FEES
_____	<b>TOTAL FEES</b>
_____	AMOUNT OF DEPOSIT REFUNDED
_____	ADDITIONAL CHARGES DUE