



This agreement is not finalized until signed by applicant & Rookery authorized staff member.

EVENT & CONTACT INFORMATION

Event Title _____ Event Purpose _____
Day/Date of Event _____ Start Time _____ am pm End Time: _____ am pm
**All set-up/clean-up should be included within rental time
Recurring Request: _____
Contact Name (Please Print) _____ Phone _____
Email _____
Sponsoring Business/Organization/Member's Name _____
Address _____
Non-Profit: Yes No Tax Exempt: Yes No

Sponsoring Business/Organization/Member (Please check appropriate descriptor box)

Rookery Activity Center Member Resident Non-Resident

EVENT DETAILS/NEEDS

Area(s) Requested: (Please check all requested)

Lap Pool – Lanes 1,2, 3, 4, 5, 6 (circle all that apply) Splash Pool w/slide Splash pool (Shared use)

Rental Details : _____

Estimated Attendance: _____

RENTAL/RESERVATION AGREEMENT

1. 100% of rental cost due at time of reservation.
2. Cancellations made up to 24 hours in advance will be responsible for 50% of the rental cost. Any cancellations less than 24 hours will be responsible for full cost of rentals
3. Additional expenses may apply for equipment use.

PAYMENT

Total Due: \$ _____

- Credit Card: Date Charged: _____
 Cash
 Check (payable to City of Lino Lakes)

AUTHORIZATION

(I understand & agree to comply with The Rookery Activity Center policies & procedures)

Signature of Applicant _____ Phone _____ E-mail _____

Office Use Only

Request approved? _____ Day/Date/Time: _____ Space/Room: _____
Date application received: _____ Date full payment received: _____ Amount received: \$ _____