

RESERVATION FOR PRIVATE USE OF THE ACTIVITY BUILDING

RENTED TO: _____ LOT # _____

PHONE # _____ DATE OF USE: _____

TIME IN: _____ TIME OUT: _____ Approx # people _____

******(Rental is for approximately 6 hours, additional hours may have higher fee)******

Deposit Fee: \$40 Rental Fee: \$100 Please make out two checks: One for \$100 payable to TCCOM. 2nd check for \$40 payable to TCCOM for \$40 deposit. Your check for \$100 will be deposited and the \$40 will be refunded to you, approx. one week after the building has been checked and is found clean and damage free. If the building is not up to the cleanliness standard your deposit will be kept by TCCOM.

******See cancellation sheet for cancellation fees.

Signed by Member: _____ Date: _____

Also Initial Lines below

*******By signing this agreement, member agrees to all provisions listed on this form and attachments.



_____ I agree to inform all my guests of the **10 MPH speed limit** in the park, beginning and ending prior to our entry gate. I agree to have signs directing guests to Activity Building.

_____ If there are more than **25 guests**, at least **2 parking attendants** are required; **1 at activity bldg. for parking and 1 attendant to be posted at the front gate with a sign of the event, provide directions to AB and open security gate or provide your own security code to guests. The attendants must be briefed as to where to park, by the office/park manager, prior to event.**

****Door must be locked to Men's /unisex bathroom**** (See office for details.)

--The Activity Building has silverware, pots and pans, some serving dishes, coffee pots, toilet tissue and paper towels for your use. ***If the use of the stove is required, prior to event date*** make arrangements with the office (320) 743-3133 to have pilot light turned on.

--To ensure the full refund of your deposit, please see attached clean-up checklist.

Private use is described as a non-park sponsored activity of a shareholder such as graduation, birthday, anniversary and family gatherings.

No solicitation type gatherings unless invited by the Board of Directors.

Please sign out a key at the office and return it to the office when you are done.

ACTIVITY BUILDING CLEAN-UP CHECKLIST

Please complete this checklist and return it to the office. Once the park custodian has given the approval that the building is clean and there is no damage, he/she will inform the office to process your refund check. If the building is not up to the cleanliness standards, your deposit will be kept by TCCOM.

PLEASE REMEMBER THE ACTIVITY BUILDING IS A **SMOKE FREE BUILDING**

_____ Dishes and silverware cleaned and put away.

_____ No food left in refrigerator, freezer or on counters.

_____ Kitchen floor mopped, other floors swept. Cleaning supplies are to be kept in the mop closet, **not in the kitchen.**

_____ Tables and chairs put back in place. If Saturday, set up for church for Sunday morning.

_____ Waste tied up and taken to the appropriate area (garbage dumpster or recycling)

_____ Bathrooms cleaned and the **unisex bathroom door locked w/the dead bolt lock.**

_____ If you use towels or cloths, please launder and return them to the activity building.

_____ Lights, fans turned off and doors locked. Please return the key to the office.

Office Number: 320-743-3133

- If the gas needs to be turned on for the stove and the pilot light lit (**PRIOR to the event**)
- If the propane tank needs to be filled for the barbeque grill

There is now a shop vac for use to clean the floor after your activity. It can be used alone or with a broom, whatever works for you. Kitchen and bathrooms still need to be mopped and not vacuumed. You will find the shop vac located in the area behind the stage. Please return it there after using it.

This is for dry vac use only. DO NOT USE AS A WET VAC.

THE MEMBERS OF THE ACTIVITY COMMITTEE THANK YOU FOR TAKING CARE OF OUR PARK FACILITY!!!

ACTIVITY BUILDING RENTAL CANCELLATION

Person who rented it _____

Lot# _____

Date of rental _____

Date cancellation received by TCCOM office _____

Reason for cancellation _____

Cancellation fees are as follows:

_____ \$10.00 cancellation fee 31 or more days prior to event

_____ \$20.00 cancellation fee 14-30 days prior to event

_____ \$60.00 cancellation fee less than 14 days prior to event

Refund of paid fees: _____

SIGNED BY TCCOM OFFICE STAFF _____

DATE: _____

Signature of original renter _____

Signature of person cancelling if not the same _____

****EMAIL OR BRING THIS FORM TO THE OFFICE** (phone cancellations are not accepted)