

**RESERVATION FOR PRIVATE USE OF THE ACTIVITY BUILDING**

RENTED TO: \_\_\_\_\_ LOT # \_\_\_\_\_

PHONE # \_\_\_\_\_ DATE OF USE: \_\_\_\_\_

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_

Deposit Fee: \$40 Rental Fee: \$60 Please make out one check for \$100 payable to TCCOM. 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: \_\_\_\_\_

Signed by TCCOM: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*By signing this agreement, member agrees to provisions listed below(cleaning requirements and cancellation fees)

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--I agree to inform all my guests of the **10 MPH speed limit** in the park, beginning and ending prior to our entry gate.

--If there are more than 25 guests, a minimum of 2 parking attendants are required. The attendants must be briefed as to where to park either by the office or Dick Picken prior to event.

--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***, please make arrangements **prior to event** with Chuck McColgan (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 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.

Copies:

1 – Original to Office with check for \$100

1 – Copy for User

1 – Copy to Park Custodian

## 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, 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.

\_\_\_\_\_ Waste tied up and taken to the appropriate area.

\_\_\_\_\_ Bathrooms cleaned.

\_\_\_\_\_ If you use towels or cloths, please launder and return 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 moped 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 key for the shed behind the activity building (next to Give N Take shed) is hanging on the wall at the end of the cupboards. Please return it to the hook when finished.

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)**