

Elkhorn Community Center Rental Application

Matheson Memorial Library

101 N. Wisconsin St. Elkhorn, WI 53121 • 262-723-2678 • ggrice@elkhorn.lib.wi.us

Name: _____ Date of Event: ____/____/____
 Business/Organization: _____ Time: START ____am/pm END: ____ am/pm
 Address: _____ Type of Event: _____
 City: _____ Zip: _____ # People: _____ Private Public *
 Home Ph: _____ Cell Ph: _____ *Additional event and alcohol permits are required
 Email: _____ through City Hall for public events.

***** PLEASE PICK UP KEYS DURING LIBRARY HOURS BEFORE YOUR EVENT! *****

| <u>Multi-Purpose Room</u> | <u>Location</u> | <u>Resident</u> | <u>Hours</u> | <u>Total</u> | or | <u>Non-Resident</u> | <u>Hours</u> | <u>Total</u> |
|---|----------------------|------------------|-----------------|--------------|----|---------------------|-----------------|--------------|
| <input type="checkbox"/> Community Center | 101 N. Wisconsin St. | \$30/hr. | x _____ = _____ | | | \$60/hr. | x _____ = _____ | |
| | | 5.5% Tax: | _____ | | | 5.5% Tax: | _____ | |
| | | Subtotal: | _____ | | | Subtotal: | _____ | |

Additions

Alcohol Permit \$50 x _____ = _____ or \$50 x _____ = _____

MAKE CHECKS PAYABLE TO :

Matheson Memorial Library Total Fee: _____ Total Fee: _____

Date Paid: _____ Cash or Check #: _____ Amount Paid: _____ Office Initials: _____

\$100 SECURITY DEPOSIT REQUIRED: The security deposit must be received separately in cash (no exceptions). It can be picked up one week after the event has taken place. Date Received : _____ Check #: _____

Organizations that meet weekly on the same day and time of day each week for a period of one hour or less will pay a reduced rate.

I, the undersigned, on behalf of the above mentioned organization, do hereby agree that we will abide by the policies governing the use of this facility as set forth on the back of this application (**a copy of the policy can be provided upon request**). I will specifically accept responsibility for any damages to the facility as a result of the occupancy of said premises by our organization. Said premises will be left as clean as when the organization arrives.

I HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS AND BLAMELESS the City of Elkhorn, and Matheson Memorial Library, its officers, agents and employees, boards, and commissions from any and all liability from damages, loss, or injury either to person or property which may be sustained while using said facility.

Signature: _____ Date: _____

Please make checks payable to: Matheson Memorial Library

Security deposits must be in cash

**City of Elkhorn
Community Center
Facilities Agreement**

The applicant agrees to each of the conditions, statements, and representations in this document.

1. Groups, organizations, and individuals using City facilities shall comply with the laws of the United States, State of Wisconsin, County of Walworth, and City of Elkhorn. The City buildings are public facilities and are open to the general public during normal operating hours. Authorized personnel of the City of Elkhorn, the Wisconsin State Police or the Walworth County Sheriff may revoke any application previously granted if it is determined by such person that the application contained any misrepresentation or false statement, or that any condition set forth in the rules, regulations or policies is not being complied with, or that the safety of the patrons or visitors to the facility is endangered by the continuation of such activity. If revoked, the rental and deposit fees will not be refunded.
2. When not in use for City business, the room may be reserved for the following approved purposes: for learning or the arts; for holding social, civic and recreational meetings and entertainments that are open to the public; for meetings of community organizations or clubs; for wedding receptions, birthday, anniversary or other family parties.
3. At no time may the Community Center or kitchen be reserved by groups whose principal purpose or activity is commercial sales.
4. **TIMES.** The Community Center is available from 8:00 am to 11:00 pm daily, Monday through Sunday. The room is available at the hours approved on this form. You may not decorate, store items, or utilize the facility outside the approved time. Any event that starts earlier or runs later than the approved time will be assessed the hourly fee in full-hour increments.
5. **LIABILITY.** The applicant agrees to assume liability for any damage done to any City of Elkhorn property as a result of their gathering. In addition, all renters must sign a liability waiver sheet.
6. **INSURANCE REQUIREMENT.** If your group is inviting the general public to be spectators or participants, or you will be selling concessions to the public you are required to present a certificate of Insurance in the amount of \$300,000 bodily injury and \$100,000 property damage; or \$300,000 single limit for bodily injury and property damage combined for liability requirements. Whenever possible, the City of Elkhorn should be named as an added insured. The Certificate of Insurance is due in the City Clerk's office **ten days prior** to your event.
7. **CATERING.** If an event is catered, the caterer must also supply the City with a certificate of insurance with a minimum amount of \$1,000,000 liability, naming the City of Elkhorn additional insured. Proof of insurance is due in the City Clerk's office ten days prior to the event.
8. **ALCOHOLIC BEVERAGES.** If you are serving alcohol, at a private party or event, free of charge, you must include the \$50 alcohol permit fee with this application. If you are a Bonafide club and will be providing *alcoholic beverages to the public*, whether free or by charging for it, you will be required to apply for and obtain a "Temporary Class B (picnic) Beer and Wine License" from the City Clerk's office and obtain the proper Certificate of Insurance (see #6 above). You will need to apply for the temporary license a minimum of **four weeks prior** to your event.
9. **SECURITY DEPOSIT.** For one time events, a \$100 security deposit is required in cash only. Deposits will be refunded if the building is left in the condition in which it was found, and if the applicant has complied with all the terms and conditions of the agreement.
10. **SMOKING.** There shall be no smoking on the premises.
11. **CLEAN UP.** The applicant is responsible for set-up, clean up, and take down of the room. Set-up, clean up time and take-down is considered part of the rental period for which a fee must be paid. The room must be left in the condition in which it was found, which includes cleaning and taking out the garbage. Please bring your own cleaning supplies. Any cleaning performed by City staff as result of your event will be assessed a \$50 per hour fee, and will be assessed in full-hour increments.
12. **INCLEMENT WEATHER.** If your event is cancelled due to an emergency situation or inclement weather or if City personnel needs to close the building, rental fees will be returned or you may reapply for another date, depending on availability, by contacting the Library on the business day following your event for no additional charge.
13. **FEES.** All fees are due in advance and are non-refundable. There is a \$35 service charge for all returned checks. Renters paying in cash must be able to give exact change for the full cost of the rental.
14. **RESIDENCEY.** Residents are those who live within the city limits of Elkhorn. Non-residents are those who live outside the city limits.
15. **KEYS.** The applicant must pick up keys during library hours, or by 6:00 pm Friday for weekend events, and must return keys by 4:00 pm on the first workday immediately following the date of use.