

DETHLEFS COMMUNITY CENTER RENTAL AGREEMENT

City of Spicer
PO BOX 656, SPICER, MN 56288
320.796.5562 | cityofspicer.com



INDICATE RENTAL TYPE BELOW:

RENTAL DATE: _____

____ PRIVATE/COMMERCIAL \$100.00

____ CLUBS \$50.00

____ EXEMPT ORGANIZATIONS NO CHARGE VETERANS ORGANIZATIONS, BOY/GIRL SCOUTS/NL-S SCHOOLS
AUDIO/VISUAL EQUIPMENT IN ADDITION TO THE RENTAL FEE. COVERS INSTRUCTION ON USE
____ RENTAL \$50.00 OF EQUIPMENT BY CITY STAFF.

RENTER NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

EVENT START TIME: _____ EVENT END TIME: _____

TYPE OF EVENT: _____ # OF PEOPLE: _____

BUILDING ACCESS TIME: _____ (SET UP AND PREPARE FOR YOUR EVENT)

\$200.00 DAMAGE DEPOSIT REQUIRED AT TIME OF RESERVATION.

CREDIT CARD ON FILE _____ CHECK DEPOSIT/CHECK#: _____

RULES: No rental is guaranteed without confirmation from the Spicer City Office. Dethlefs Community Center is smoke, alcohol and drug free. Chairs, tables or other furniture/equipment will not be removed from the building. Rental party is responsible to leave the Dethlefs Community Center areas as they found them. Tables, chairs, servings areas, counters and sinks must be wiped down as necessary and returned to their original set up. Trash must be picked up and trash containers must be emptied. Visible spots on the floor must be vacuumed/swept up. Piano and pool table must remain in place. You may use the serving counter of the kitchen and the sink next to it, however use of any other part of the kitchen or its equipment is strictly forbidden.

LOCK UP AND SECURITY DEPOSIT: Key cards must be returned in the outside drop box immediately following rental or dropped off at the City Office the next business day following the rental or the security deposit will be claimed by the City. Security deposits made by check or with banking information will be shredded if everything is found satisfactory after the rental and key card is returned.

Signature

Date

DATE PAID _____

KEY CARD # _____

DIRECT PAYMENT AUTHORIZATION
CREDIT/DEBIT CARD AUTHORIZATION
DETHLEFS COMMUNITY CENTER SECURITY DEPOSIT

CREDIT/DEBIT CARD INFORMATION

NAME ON CARD: _____

ACCOUNT #: _____

EXPIRATION DATE: _____

SECURITY CODE _____

ZIP CODE ASSOCIATED WITH CARD: _____

There is a processing fee charged by the credit/debit card processor in addition to the \$200.00 damage charge in the event your card is charged.

Signature

Date