

Date Rental Fee Paid _____
Amount Received: _____
Fee Posted on Computer _____

2012

CITY OF STURGEON BAY PARKS & RECREATION DEPT.
835 N. 14th AVE., STURGEON BAY, WI 54235
(920) 746-2914 7:00 a.m. to 3:30 p.m. weekdays

FACILITIES REQUEST USE FORM

Name of individual or group requesting use: _____

Contact person (s): _____

Address: _____

What facilities are requested: Otumba Sunset Sawyer Cherry Blossom Martin

When needed: (Please include any additional set-up and clean up time)

Date: _____ Time: _____

Number of people using facility: ___ Under 100 ___ 101-200 ___ Over 201

FEES:	<u>City Resident</u>	<u>Non-Resident</u>
Group of 100 or less	\$ 58.03	\$ 81.24
Group of 101-200	\$ 87.57	\$ 99.17
Group of 201 or more	\$174.08	\$ 301.73

PLUS a \$50.00 refundable security Deposit. Checks payable to: City of Sturgeon Bay
Note: It may take up to 4 weeks for the security deposit to be returned.
Any cancellations must be received at least 4 weeks before event.

Describe nature of event:

Will alcohol be served? (Separate permit is required from City Hall) _____
421 Michigan St., 8:00 to 4:30 weekdays, 746-2900

What arrangements have been made for clean-up, during and after event?

Are there any special hook-ups for equipment, instruments, **water**, etc. which need to be made or used and who is handling this?

Applicant Signature: _____

Date: _____