

SeniorPlace/West Hills Tennis & Fitness Center Rental Application

SeniorPlace: 500 Dunnell Drive, Owatonna, MN 55060; Phone: 507-444-4280
Tennis & Fitness Center: 502 Dunnell Drive, Owatonna, MN 55060; Phone: 507-444-4290
 Eric Anderson 507-774-7102 email: Eric.Anderson@ci.owatonna.mn.us
 Dani Summer 507-774-7105 email: Danielle.Summer@ci.owatonna.mn.us
 Dani Bakken 507-774-7110 email: Danielle.Bakken@ci.owatonna.mn.us

Today's Date: _____ Employee Receiving the Request _____

Name of Individual and Organization (if applicable): _____

Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Internal Group (who): _____ Private Group: _____ Non-Profit Group: _____ (tax exempt form received: yes / no)

Purpose of Rental: (ie: birthday, meeting, etc.) _____ Approximate # of Guests: _____

Room(s) Requested -- Note: Prices do not include applicable tax

SeniorPlace	Rental Date	Start/End Time (including setup/cleanup)	One Time Rental	Monthly/ Non-Profit	3 hour Rental Reg/Non-Profit	4 hour Rental Reg/Non-Profit	5 hour Rental Reg/Non-Profit	6 hour Rental Reg/Non-Profit
Multi-Purpose Room (with Kitchen)			\$65/hour	\$50/hour	\$175/\$130	\$235/\$175	\$295/\$220	\$355/\$265
Multi-Purpose Room (1 st floor)			\$50/hour	\$35/hour	\$130/\$85	\$175/\$115	\$220/\$145	\$265/\$175
Board Room (1 st floor)			\$35/hour	\$25/hour	\$90/\$60	\$120/\$80	\$150/\$100	\$175/\$120
West Meeting Room (2 nd floor)			\$35/hour	\$25/hour	\$90/\$60	\$120/\$80	\$150/\$100	\$175/\$120
East Meeting Room (2 nd floor)			\$35/hour	\$25/hour	\$90/\$60	\$120/\$80	\$150/\$100	\$175/\$120
North Meeting Room (2 nd floor)			\$35/hour	\$25/hour	\$90/\$60	\$120/\$80	\$150/\$100	\$175/\$120
West Hills Tennis & Fitness Center	Rental Date	Start/End Time (including setup/cleanup)	One Time Rental	Less Than 2 weeks in advance	<u>Rental Notes:</u>			
Basketball Court			\$30/hour	xxx				
Pool (1 lifeguard)			\$35/hour	\$45/hour				
Pool--per additional lifeguard (number needed: _____)			\$15/hour/ per guard	\$15/hour/ per guard				
Tennis (Per Court)			\$18/hour	xxx				

Additional Equipment Needs	Nothing Request	DVD/TV	Projector Screen	Micro phone	Sound System	Piano	Other/List: _____
SeniorPlace							
Tennis & Fitness		NA	NA	NA	NA	NA	

(SP) **Coffee:** (Coffee pots are not allowed to be brought in)
 None \$5.00 per carafe \$25 per day under 50 people \$35 per day over 50 people

(SP) **Will Liquor be served?** Yes No {If yes, a Special Deputy is required on-site during the rental, additional fee paid directly to the special deputy, and your caterer must have a liquor license. If no caterer than you are also required to get insurance }

(SP) **Will there be Music/Dance (DJ, band)?** Yes No

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Total Amount Due: \$ _____	Amount Paid	Date Paid	Invoice #	Date Invoiced	Tender Type (CC Type, Cash, Check#)	Staff Taking Payment
Initial Payment	\$					
Remaining Balance	\$					
Damage Deposit (\$200 if applicable)	\$					
Cancellation/Admin Fee	\$					

*Requested Invoicing Option (only available to monthly renters): Monthly Quarterly

Confirmation Details	Tennis & Fitness Center	SeniorPlace	Rental Follow Up
Date Rental Confirmed			Completed By:
Guest Services Staff on Duty			Date:
Lifeguard On Duty		NA	Comments:
Date Rental Cancelled			

RENTAL POLICIES/PROCEDURES:

1. The rental fee for the first hour of the entire rental is due when the contract is turned in. Full payment is due at least one week in advance of the rental date except when the invoicing option is used. The reservation is not official until the contract is submitted, damage deposit is paid, and a minimum of the first hour rental fee is paid
2. Damage deposit of \$200 is required when contract is handed in for all groups serving alcohol, groups larger than 60 people (excluding regular monthly renters) or at the discretion of management. Deposit is refunded if there are no issues with the rental including rented area not being appropriately cleaned or damage to equipment or facility.
3. *Cancellations & Building Closed:* Cancellations/Changes to the rental dates/times/rooms must be received 2 weeks prior to the date of rental to avoid rental charges. Any rental cancellations/changes under 2 weeks, the renter will be responsible for the full rental amount. A \$10 administrative fee will be applied to all cancellations. If building is closed due to inclement weather, renters will receive the option of a credit, a refund, or the event can be rescheduled.
4. No keys will be issued. For non- regular hour rentals: The doors will be unlocked 15 minutes prior to start of your rental.
5. Staff will only open the scheduled rooms at the times they have rented according to the contracted hours. Any additional rooms/hours will be billed to the Renter. Please be cleaned up and ready to exit the building by your ending time. Should your time exceed your contracted hours, additional billing will accrue.
6. *Coffee Pots at SeniorPlace:* Renters are NOT allowed to bring in coffee pots. Exception – catered events.
7. *Multi-Purpose Room:* Renters should not be in the kitchen area unless they have rented that space with the use of the ovens only. Renters are not to be going in the cupboards/drawers to use items or use the dishwasher. Should you need to go in the kitchen to use the sinks for clean-up please notify staff.
8. The room(s) rented must be left in a clean condition with all equipment returned to its proper location (tables, chairs, etc.) Set up and decorating for the rental is the responsibility of the renter.
9. The renter/organization assumes all responsibility for payment of any damages to equipment and facility.
10. The facility will be used only by the organization or individual who rented it and for the purpose it was rented.
11. This application is made subject to the rules of the rented facility and City of Owatonna and the Parks & Recreation.
12. In consideration of the use of this facility, applicant/renter agrees that the City of Owatonna shall not be liable for any personal injury or damages to property, which may occur during a time when the facility is in use by the applicant/renter.

SIGNATURE OF APPLICANT/RENTER: _____ Date: _____