

IRENE STERN FULSHEAR COMMUNITY CENTER

FACILITY USE APPLICATION

Date of Application: _____

APPLICANT: _____

ORGANIZATION: _____

ADDRESS: _____

HOME PHONE: _____ WORK: _____

DATE (S) REQUESTED: _____ HOURS: _____

PURPOSE: _____

ARE ALCOHOLIC BEVERAGES TO BE SERVED: YES / NO

SUPERVISOR TO WORK: _____ HOURS

OFFICERS TO WORK: _____ HOURS

***** OFFICE USE ONLY *****

Deposit Paid: \$_____ Receipt No. _____ Date: _____
(Payable at time of reservation)

Key (s) Out: _____ In: _____

Rental Fees: \$_____ (\$85.00 per hour or \$400.00 per day)

Cleaning/Sanatizing Fees: \$_____ (required \$100.00)

Setup/Teardown Fees: \$_____ (optional \$150.00)

Supervisor Fees: \$_____ (required \$10.00 per hour)

Security Officers Fees: \$_____ (required if alcohol is served \$70.00 per hour)

TOTAL PAID \$ _____ Receipt No. _____ Date: _____