



Veterans Memorial Community Center

8055 Barbara Avenue
Inver Grove Heights, MN 55077
651.450.2585



ROOM RENTAL APPLICATION

Request Received _____ Rental Date _____

RENTER INFORMATION:

Contact Person _____ Phone Numbers (h) _____ (w) _____ (c) _____

Address _____ City _____

State _____ Zip Code _____ Email _____

Organization _____ Non-Profit : **Yes** **No** Tax-Exempt: **Yes** **No**

Type of Event _____ # Attending _____

RENTAL OPTIONS:

- Community Room 1 Community Room 2 Community Room 3
- Armory Room A Armory Room B Armory Room C
- The Grove Room Paradise Island Castaway Cove
- Kitchen

Additional Rental Accessories:

- TV/DVD Projection Screen Podium PA System Internet Access
- Gym only Community Rooms 1,2,3 only

**See price sheet for accessory fees

RENTAL TIMES:

Arrival/Set Up Time: _____ Event Start Time: _____ Event End Time: _____

**All set-up and clean-up must be within rental time

**All rentals must be held within building operating hours; rentals outside of building hours will incur attendant charges

Special room layout requested: **Yes** **No** (must notify rental coordinator 2 weeks prior to rental)

RENTAL FEES: Payment in full as well as signed 'Use Agreement' are required to secure a reservation.

Cancellation requests received 72 hours or more before rental date will be eligible for a refund minus a 15% administrative fee. No refunds will be issued for cancellations under 72 hours.

FOOD SERVICE:

Renter providing food at event? **Yes** **No**

If rental is for 100 people or more, a licensed caterer is required.

Renters Caterer _____

- All food and beverages must be served by a licensed and insured provider.
- A copy of the license/insurance must be provided to the Rental Coordinator two weeks prior to event.

Caterer license/insurance received: **Yes** **No**

**Alcohol prohibited in all areas of VMCC, with the exception of the Armory Gymnasium, see additional information on alcohol use.

Office Use Only

Payment Amount Received \$ _____ Date Entered in MAX: _____ Staff Initials: _____

___ Visa ___ Mastercard ___ Discover ___ Cash ___ Check (# _____)

Notes: