

Facility Use Application
Community Education & Recreation – 516 Industrial Blvd ~ Waconia, MN 55387
Phone: 952-442-0610 Fax: 952-442-0619
www.waconiacommunityed.org

Individual/Organziation: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Home Phone: _____ **Work Phone:** _____

Cell Phone: _____ **E-mail:** _____

Description of usage: _____

Estimated number of participants:
 ~ Youth (ages 0 – 12) _____ ~ Teen (ages 13 – 18) _____
 ~ Adult (ages 19 – 54) _____ ~ Senior (ages 55+) _____

What percentage of participants are residents of ISD #110? (Please circle)
 100% 75% Less than 75%

Will a participant fee or admission be charged? Yes No Amount: _____

Will concessions be sold? Yes No

Building Requested: (Please Circle)
 Southview Elementary School Bayview Elementary School Laketown Elementary School
 Waconia Middle School Waconia High School Waconia Enrichment Center

Area Desired for use:
 1. _____
 2. _____
 3. _____

Date(s) of use: _____

Start Time: _____ **End Time:** _____

Special Requests:
 ~ Screen ~ Video/Power Point Projector ~ Podium
 ~ Tables - # _____ ~ Chairs - # _____ ~ Microphone
 ~ TV/VCR ~ Spotlights ~Other _____

I, the undersigned, herby acknowledge and agree, either personally as the above named individual or as a representative on behalf of the above named organization as follows: It is acknowledged and agree that ISD #110 Community Education are not liable or responsible for any accidents or injuries which may occur in the use of the facility. It is further acknowledged and agreed that responsibility for the actions of all participants in the activities and the security of the facility are assumed by the individual/organization. It is further acknowledged and agreed that liability insurance, or such other insurance as appropriate and/or required by ISD #110 shall be provided by individual/organization.

Signature of Applicant/Agent: _____