



# Veterans Memorial Community Center

8055 Barbara Avenue  
Inver Grove Heights, MN 55077  
651.554.3423(p)/651.259-8033(f)



## AQUATICS GROUP VISIT APPLICATION

*We require a 2 week minimum notice on all group visits.*

### RENTER INFORMATION:

Contact Person \_\_\_\_\_ Phone Numbers (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_

Organization \_\_\_\_\_ Non-Profit : **Yes**  **No**  Tax-Exempt: **Yes**  **No**

# Attending (Include both participants and supervisors) \_\_\_\_\_

### REQUESTS FOR DATES/TIMES:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**RENTAL FEES:** A Security Deposit payment of \$50.00 and a copy of Tax Exemption certificate (ST-3 or ST-17) are required to secure a reservation. Upon securing a reservation you will be required to sign a 'Use Agreement'. All remaining fees will be paid on the day of your visit.

### Group Discount Rates:

- 20 or more people \$6.00 per person or \$5.60 per person (if tax exempt)

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

**Office Use Only** Date Request Received: \_\_\_\_\_

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

\_\_\_\_ Visa \_\_\_\_ Mastercard \_\_\_\_ Discover \_\_\_\_ Cash \_\_\_\_ Check (# \_\_\_\_\_)

Notes: