

WALKER COMMUNITY CENTER

RESERVATION APPLICATION

Users Name: _____ Phone (Day): _____

Phone (Evening): _____ Cell Phone: _____

Mailing Address: _____

Event Name: _____ Event Date: _____

Opening Time: _____ a.m./p.m. Closing Time: _____ a.m./p.m.

Attendance _____

User Status (please check one) _____ City Resident _____ Non Profit 501c3

Set Up Requirements:

Number of Chairs: _____ Number of Tables: _____

If you would like the tables and chairs set up in specific way, please attach a diagram.

DEPOSIT REQUIRED \$ _____ FEE REQUIRED \$ _____

The policies and procedures outlined on the Community Center information sheet serve as a rental agreement between the “renter” and the City of North Muskegon. Further, the “renter” acknowledges this agreement with the “City” and agrees to be bound by it.

<p>I HAVE READ AND UNDERSTAND THE POLICIES GOVERNING THE USE OF THE WALKER COMMUNITY CENTER. I ASSUME RESPONSIBILITY FOR THE PROPER PAYMENT OF ALL CHANGES RELATED TO THIS RESERVATION. I UNDERSTAND THAT MY RESERVATION WILL NOT BE HONORED WITHOUT ALL FEES PAID.</p>

User Signature _____

Date: _____

PLEASE RETURN SIGNED APPLICATION WITH PAYMENT TO:
CITY OF NORTH MUSKEGON
1502 Ruddiman Dr
N. Muskegon, MI 49445