

RENTAL APPLICATION FOR THE LUTSEN TOWNSHIP TOWN HALL

116 Caribou Trail, Lutsen, MN

Applications must be submitted to the town clerk at least **14 days** before the event. Mail to PO Box 151, Lutsen, MN 55612 or emailed lutsentownship@gmail.com or delivered to the clerk.

Date of the Event: _____ Type of Event: _____

Applicant Information.

Name of Applicant: _____ Date of Application: _____

Address: _____ Daytime Phone: _____

_____ Evening Phone: _____

Rental Hours. Starting Time: _____ Ending Time: _____ (no later than _____)

Set-up and Clean-up Times. Applicant may request additional time to set-up for the event or to clean-up after the event.

Set-up Date & Times: _____ Clean-up Date & Times: _____

Alcohol. Will any alcohol be brought to or consumed at the event? ____ Yes ____ No

IMPORTANT: Alcohol may not be sold or otherwise exchanged for compensation in any way in connection with the use of the Hall. If alcohol will be present, the Town may require the Renter to hire a licensed law enforcement officer to provide security for the event. In addition,

Insurance. Applicant may be required to provide proof of liability insurance before the event in an amount determined by the Town.

Residency. Is the applicant a resident of the Town? ____ Yes ____ No

Rental Fees & Damage Deposit. Fees and a damage deposit, if required, must be paid to the Town at least **14 days** before the event or this application is voided. The applicable fees are those as set by the Town in its Township Hall Rental Policy.

Applicant understands and agrees that if its application is approved, applicant is fully responsible for the event and is subject to the terms and conditions of the Township Hall Rental Policy.

Applicant's Signature: _____ Date: _____

TOWN USE ONLY

Application approved? ____ Yes ____ No. If "No", the reason(s) for the denial:

The approval is conditioned upon the following modifications, limitations, or additional requirements (if any):

Fees: Rental Fee: \$ _____ Damage Deposit (if required): \$ _____

For the Town: _____
Printed Name Signature Date