2014 EVERGREEN RESERVATION FORM

NAME:		
ADDRESS:		
PHONE NUMBER:		
DATE OF THE EVENT:	WEEKDAY: _	
HOURS: FROM:	TO:	
AREA TO RESERVE: DINING ROOM and: KITCHENETTE:		\$100.00
CARPETED ROOM:		\$ 60.00
AFTER HOURS OPEN OR LOCKUP:		\$ 50.00
TOTAL RE	NTAL FEE:	
DAMAGE DEPOSIT: (Separate chec	k to be returned when keys	are returned) - \$100.00
SIGNATURE:		
DINING ROOM SEATS UP TO 75 P	EOPLE	
CARPETED ROOM SEATS UP TO	25 PEOPLE	
KITCHENETTE INCLUDES STOVI	E AND SINK. NO DISHES	OR UTENSILS
PHIL AND LENNY INFORMED		
AFTER HOURS OPENING OR LOC THE CITY CENTER DURING NOI PROCEDURES ARE DONE WITH S	RMAL BUSINESS HOURS	S AND A WALK THROUGH OF
RENTER IS RESPONSIBLE FOR SM	NOW REMOVAL.	
DAMAGE DEPOSIT WILL BE F DAMAGE HAS OCCURRED	RETURNED IF ROOMS	ARE CLEANED UP AND NO
CONTACT NUMBERS: 320-234-42	216 – Andrea (M-F 8:00 –	3:30 p.m.)
NO ALCOHOL ALLOWED ON PREM	MISES.	