



City of Wapato
 205 East Third Street
 Wapato WA 98951-1326
info@wapato-city.org
 Phone: 509.877.2334
 Fax: 509.877.3979

Community Center
 1109 S Camas Ave
 Wapato WA 98951-9790
info@wapato-city.org
 Phone: 509.949.8367

Facility Rental

Check which facility

- | | |
|--|--|
| <input type="checkbox"/> Park-Shelter A-Larger | <input type="checkbox"/> Community Center-Funeral (Gym & Kitchen & Main Center Room) |
| <input type="checkbox"/> Park-Shelter B-Smaller | <input type="checkbox"/> Community Center-Classrooms |
| <input type="checkbox"/> Park-Stage & Bleachers (electricity) | <input type="checkbox"/> Community Center-Gym-Sports (4 hours only) |
| <input type="checkbox"/> Park Area (no electricity) | <input type="checkbox"/> Community Center (Main Center Room & Kitchen) |
| <input type="checkbox"/> Soccer Field | <input type="checkbox"/> Liquor at Event in Community Center |
| <input type="checkbox"/> Softball Field | |
| <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Community Center (Gym & Kitchen & Main Center Room) | |

Please print:

Date(s) requested: _____ Time Requested: _____

Name: _____ Phone: _____

Address: _____

Street **City** **State** **Zip**

Email Address: _____

Type of event: _____ # of people expected: _____

Special Concerns:

Alcoholic Beverages (Min-2 Officers for 2 hours-\$35 per hr per Officer) Band Traffic Control

Special Equipment brought into the park (explain) _____

Other (explain) _____

The undersigned, by applying to the City of Wapato for the use of the facility requested above certifies that the information contained in this application is true and correct. The undersigned agrees to exercise the utmost care in the use of the facility and to save and hold the City of Wapato harmless from all liability resulting from the use of the facility, as well as releases and indemnifies the City of Wapato from any claims arising from the use of the facility by any party. The undersigned further agrees to adhere to all rules and regulations set forth by the City of Wapato, including those listed below:

1. All fees will be paid in advance or the rental is null and void.
2. All areas will be cleaned up to staffs requirements before the deposit is refunded.
3. Alcohol is prohibited in all facilities.

Applicant Signature

Date

*****FOR OFFICIAL USE ONLY*****

Name of Renter: _____ Date of Rental _____

FEES:

	Deposit	Rental/hour	Rental/day
Park Facility Rentals			
Park Shelter A-Larger	\$50.00		\$100.00
Park Shelter B-Smaller	\$50.00		\$50.00
Park-Stage & Bleachers & Electricity	\$25.00		\$50.00
Park-Area other than Stage or Kitchen: No Electricity	\$25.00		\$50.00
Soccer Field-Other	\$100.00	\$10.00	Max \$50.00
Soccer Field League	\$100.00		\$500.00
Softball Field (per day)			\$100.00
Community Center-Gym, Kitchen, Main Center Room	\$250.00		\$700.00
Community Center-Funeral (Gym, Kitchen, Main Center Room)	\$250.00		\$250.00
Community Center-Classrooms	\$100.00		\$75.00
Community Center-Gym-Sports (4 hours (don't break up or prorate))	\$250.00		\$25.00
Community Center-Main Center Room & Kitchen	\$250.00		\$75.00
Liquor at Community Center-(2 Police Officers for 2 Hours minimum)	\$200.00		\$200.00
Police Officer per hour		\$35.00	

Reserved by (staff please print name): _____

APPROVALS:

_____ Police Dept Approval # of Police needed: _____

_____ Fire Dept Approval Security needed: _____

_____ Public Works Approval (if needed)

Comments: _____

Police Dept: Officers Needed-Date & Time Received: _____

START TIME _____ END TIME _____

Officer: _____

Officer: _____

City Hall:

RENTAL RECEIPT (Please attach a copy of the receipt.):

Community Center Rental: 001.000.000.362.40.01.00

Park Rental: 001.000.000.362.40.02.00

Both can be on the same receipt.

DEPOSIT RECEIVED (Please attach a copy of the receipt.):

Community Center Deposit: 001.000.999.389.90.76.10

Park Deposit: 001.000.999.389.90.76.00

RELEASE OF DEPOSIT (Please attach a copy of the check):

Community Center: Posted Date: _____ 001.000.999.589.90.76.10

Park: Posted Date: _____ 001.000.999.589.90.76.00

Inspector of facility requests to please release the deposit back to this renter. If not, why?

Signature

Date