

APPLICATION FOR USE OF CITY HALL FACILITIES

City of Hastings
101 Fourth Street East
Hastings, Minnesota 55033
651-480-2350

www.hastingsmn.gov

Completed form can be emailed to
clatham@hastingsmn.gov

Organization Requesting Use: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Contact _____ Phone Number: _____

Type of Activity: Meeting _____

Date Requested: _____ Time Requested: _____
Start End

Estimated Attendance: _____

Special Requests: _____

Food/Beverages Served YES NO

If yes, please indicate: _____

- Attendees will not be allowed in the building until the leader (contact person) has arrived.
- Leader is responsible for ensuring that the rules and regulations for use of City Hall facilities are complied with.
- The leader must be the last to leave.
- If arrangements must be changed or canceled, please contact the Hastings City Hall at least three (3) working days in advance of scheduled use.

I hereby certify that I am an agent of the above-named organization and have been authorized to accept in their name the responsibility for observance of the rules & regulations of the City of Hastings as a condition of the issuance of this permit. I understand that the permit for use of the City facilities may be canceled if any of the rules are violated and future use may be denied.

Authorized Signature Date

For Office Use

Reservist Scheduled & Confirmed: _____ by _____

Facilities Maintenance Notified: _____ by _____

Fee Charged: _____ Receipt #: _____

\$40.00/hour (minimum 2 hours); \$40.00/hour for additional hours or portion thereof.

Deposit Collected: YES NO Check # _____
\$25.00, refundable if room is left in acceptable condition

Deposit Returned: YES NO if no, reason _____

City Administrator Signature: _____