

SHAKOPEE POLICE DEPARTMENT TRAINING/COMMUNITY ROOM RESERVATION FORM

Please complete this form and return it to Cristie Lesko at clesko@shakopeemn.gov or fax to 952-233-3811.

Name of Organization or Group:

Contact Name:

Phone Number:

Address:

City:

Zip:

Email:

Activity:

Number of People Attending:

Activity Date:

Activity Time (starting and ending):

If you will not be present to supervise this meeting, list the name of a contact who will be attending:

Contact Name:

Contact Phone Number:

Additional Information (if needed):

Summary of facility usage rules:

1. Groups are responsible for their own setup.
2. The contact listed on the form is responsible for the condition of the area and the supervision of the participants.
3. The contact is responsible for returning the room to its original condition, including replacing items removed.
4. Food is prohibited in the training room.
5. Smoking or alcohol consumption is prohibited in all City buildings.
6. Failure to clean/return the room to its original state or conduct that is deemed inappropriate may be cause for suspension or revocation of your future privileges to use the room.

I, the undersigned, hereby accept responsibility for the meeting listed, and all its participants and any others present. The undersigned agrees to defend, indemnify, and hold the City of Shakopee harmless from and against all claims, losses, and liabilities arising out of personal injury and/or damage to property relating to the use of the Training/Community Room.

Signature of Contact

Date