City of Willmar
Community Center Rental Request Form

Please return to: Willmar Community & Activity Center
624 Highway 71 NE, Willmar, MN 56201
Phone: (320) 262-5288
Email: bdiem@willmarmn.gov

General Information

Today's Date: _____
Organization Name: (if applicable)_____
Contact Name: _____
Address: _____

City: _____ State: _____ Zip: _____ Phone:_____

Email address: _____

Event Details

Date of Event _____ Time of Event: _____ to_____

Time you want facility unlocked (no earlier than 8:00am) _____

AND time your event will be out of building (this time includes clean-up, no later than 10:00pm) _____

Description of event (reunion, birthday, etc.) _____

Number attending (approximate) _____

Other equipment needed (i.e., sound system, screen, refrigerator, etc.):_____

Room(s) Needed:

_____ **Burlington Northern Room:**
Room Capacity- (with tables & Chairs)-93
(without tables & chairs)- 194

_____ **Selvig Room:**
Room Capacity: (with tables & chairs) - 99
(without tables & chairs) – 198

_____ **Sunshine Room:**
Room Capacity- (with tables & chairs) – 38
(without tables & chairs) – 76

_____ **Reynolds Room:**
Room Capacity- 15

	Rate/day	**Amount Submitted**
Burlington Northern Room/Selvig	$100	_____
Sunshine Room	$60	_____
Reynolds Room	$60	_____
Staffing Costs (required if request outside of operating hours)	$20 per hour	_____
	Total Amount Paid	_____

Credit Card # _____ **Exp.**_____**CVV Code** _____
Master Card, Visa, Discover and American Express accepted

Check # _____ **Cash-**_____

Please submit completed form to bdiem@willmarmn.gov or return to the Community Center. You will receive confirmation if your request has been approved or not.

Request is **NOT** reserved until payment is received.

No alcoholic beverages are permitted in the Community Center.
Must be paid prior to the time of the reservation. A $10 cancellation fee for cancellations made a week or more in advance. A $20 cancellation fee for cancellations made week of event.