



FACILITY RESERVATION

1700 Breckenridge St
Mayville WI 53050

(Phone: 920-387-7988 / Fax: 920-387-7707)

Name: _____ Member: _____ Non-Member Resident: _____ Non-Member Non-Res: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Rental Day/Date: _____ Time (includes set-up & clean-up): _____

RESERVATION SELECTION: Event: _____ Guest Count # _____

Party for: _____
Name

Rental Room A _____

Rental Room B _____

Rental Rooms A & B _____

Private Pool Party _____

Gymnasium _____

Full TAG Center _____

	Member	Non-Member Resident	Non-Member Non-Resident
	<u>2 Hrs</u>	<u>2 Hrs</u>	<u>2 Hrs</u>
Rental Room A (Kitchenette)	\$45.00	\$70.00	\$80.00
Rental Room B (Full Kitchen)	\$55.00	\$80.00	\$90.00
Rental Rooms A & B	\$75.00	\$100.00	\$110.00
	<u>4 Hrs</u>	<u>4 Hrs</u>	<u>4 Hrs</u>
Rental Room A (Kitchenette)	\$75.00	\$115.00	\$130.00
Rental Room B (Full Kitchen)	\$85.00	\$125.00	\$140.00
Rental Rooms A & B	\$115.00	\$145.00	\$160.00
Gymnasium / hr	\$40.00/hr	\$50.00/hr	\$55.00/hr
Private Pool Party / hr	\$130.00/hr	\$150.00/hr	\$180.00/hr
Full TAG Center / hr	\$190.00/hr	\$220.00/hr	\$250.00/hr

RENTAL INFORMATION

Reservations are confirmed only when the rental fee is paid in full, security deposit is secure and necessary paperwork is completed.

- Pool, Gymnasium and Full TAG Center Rentals require a minimum of two weeks advance notice.
- Rental time includes set-up and clean-up. Rental Rooms going over reserved time will be charged \$20.00 every 15 minutes until concluded.

AFTER HOURS RENTAL

After Hours Rental Rooms are available to reserve. There will be an extra charge of \$10 per hour for a required TAG Center Building Supervisor.

CANCELLATIONS

Full refunds are made if the date is cancelled two weeks prior to the rental date. If it is cancelled after two weeks, full refund will be made only after the room is re-rented. If cancellation is needed for bad weather, your event can be rescheduled another day.

RETURNED CHECKS

Returned checks and bank drafts will be assessed a \$35.00 processing fee for any insufficient funds.

SECURITY DEPOSITS

Rental Rooms...\$150

Aquatic Center or Gymnasium...\$200

I certify by my signature that I have received, read and understand the conditions listed above and on the back page. I agree that failure to follow these policies will result in full or partial reduction of my security deposit.

Renter Signature _____ Date Paid _____

RENTAL FEE PAID \$ _____ Ck# _____ Cash _____ Credit Card _____

SECURITY DEPOSIT \$ _____ Ck# _____ Cash _____

BUILDING SUPERVISOR \$ _____ Ck# _____ Cash _____ Credit Card _____

_____ Staff Initials