

CITY OF OCONOMOWOC

174 E. Wisconsin Avenue

P.O. Box 27

Oconomowoc, WI 53066-0027

CITY HALL FACILITY USE APPLICATION & AGREEMENT

Name of Group/Organization _____

Name of Applicant _____ Telephone Number _____

Street Address _____ Fax Number _____

City/State/Zip _____

Day and Date of Meeting _____

Time (Include set-up time) From _____ a.m./p.m. To _____ a.m./p.m.

Agenda Items to be discussed _____

Estimated Attendance _____ Special Equipment to be used _____

Admission Charge (If any) _____

Room Requested:

Conference Room #2 (Maximum Seating = 6)	_____
Conference Room #3 (Maximum Seating = 48)	_____
Conference Room #4 (Maximum Seating = 6)	_____
Council Chambers (Maximum Seating = 168)	_____

I have read the rules and regulations for public use of City Hall and agree to abide by them. I will also instruct my group of these rules and regulations and see that they abide by the same.

Accepted this _____ day of _____, 20____

(Signature of Applicant) (Date)

City Clerk/Deputy Clerk

Deposit of \$15.00 received this _____ day of _____, 20____

City Clerk/Deputy Clerk

Copies to:	Mayor	Conference Room Inspected _____
	City Administrator	(Date)
	Police Department	Satisfactory _____ Unsatisfactory _____
	Director of Public Works	
	Maintenance	
Requesting Group/Organization	_____	Authorized Signature/City of Oconomowoc