



# SCHAUMBURG PARK DISTRICT RENTAL APPLICATION

**Meineke Recreation Center** | 220 E. Weathersfield Way, Schaumburg, IL 60193  
Phone: 847/985-2143 • Fax: 847/985-2461

<b>Rental Day/Date:</b>	<b>Rental Time:</b>	
<b>Name:</b>	<b>Primary Phone:</b>	
<b>Address:</b>		
<b>City/Zip:</b>		
<b>Number of Guests:</b>	<b>Deposit Due</b> <i>(2 weeks prior to event):</i>	
<b>Rental Room:</b>	<b>Rental Taken By:</b>	<b>Date Rental Received:</b>

## RENTAL FEES

Room A/B:..... Resident: \$30/hr; Non-Resident: \$50/hr  
 Room C/D:..... Resident: \$40/hr; Non-Resident: \$60/hr  
 Kitchen:..... Resident: \$20/hr; Non-Resident: \$30/hr

Half Gymnasium: ..... Resident: \$35/hr; Non-Resident: \$50/hr  
 Full Gymnasium: ..... Resident: \$60/hr; Non-Resident: \$85/hr

- Fee includes setup and takedown of four tables and 24 chairs. Additional tables and chairs may be added for \$10/table and \$10/set of six chairs.
- All requests are on a first come, first served basis. A \$50 down payment is required with the application two weeks prior to the rental date. Deposit will be applied to the balance at the time of rental.
- Rentals including the use of the kitchen may use the refrigerator, stove, microwave and sink. Cooking is not permitted, only warming of food.

## PAYMENT INFORMATION *(Includes four tables and 24 chairs)*

Room: \_\_\_\_\_ # of hours: \_\_\_\_\_ x \$ \_\_\_\_\_ per hour = \$ \_\_\_\_\_

Additional Tables: \_\_\_\_\_ x \$10/table = \$ \_\_\_\_\_

Additional Chairs: \_\_\_\_\_ x \$10/set of six = \$ \_\_\_\_\_

**Down Payment** - \$ \_\_\_\_\_

**BALANCE DUE** \$ \_\_\_\_\_

### Office Use Only

Check Number \_\_\_\_\_     Cash     Credit Card *(Check one):*     Visa     MC     AMEX     Discover

Credit Card Number \_\_\_\_\_ CVC # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_