## **AMERICAN LEGION CHARLES COWDEN POST 184**

108 1<sup>ST</sup> AVE SE, P.O. BOX 255 PINE ISLAND, MN 55963 507-356-8991

## **Rental Application**

Applications must be submitted to the Legion Rental Contact as far in advance of the event as possible. If not a 501c tax exempt organization a \$25 non-refundable application fee must accompany the application. The application fee will be credited toward the rental fees. Proof of 501c exempt status (copy of Determination letter from IRS) must be presented at time of rental application to have fees waived.

Person or group requesting re	ental:		-
Is the applicant a member of	the Pine Island American l	Legion Post 184Yes No	
Name of Responsible Person:			
(Must be an adult over the ag	e of 21.)		
Address:			
City	State	Zip	
Phone:(home)	(work)	(cell)	
E-mail:			
INFORMATION			
Date of Event:	Event:Type of Event:		
Rental Hours: Starting Time: _ should include time needed for		Ending Time:	(Rental hours
Event hours: Starting time: Ending Time: must be no later than midnight)			(Ending time
Expected number of attended	es/guests:		
What kind of food will be serv	red, if any?Snacks _	Full Meal (breakfast lunch supper)	
How will food be prepared/pr	ovided?		
If catered, who will be caterin	g the event?		
		ental policy and understand and agree that ect to the terms and conditions of the Legi	
Responsible person signature	:	Date:	