



USER GROUP Information Form

Savage Sports Center | 13450 Dakota Ave. S., Savage, MN 55378 | Office: 952-567-2095
Savage Parks and Recreation | 13770 Dakota Ave., Savage, MN 55378 | Office: 952-224-3420
Email: cdill@cityofsavage.com

GROUP INFORMATION

Association/ Group Name: Sport/Team: Number of Participants:

Group Mailing Address: City: State: Zip:

Business Phone Number: Administrative Email Address:

Website:

Emergency Contact (in case of facility space/city emergency) Emergency Contact Phone Number:

BOARD INFORMATION

Board President: Phone #: Email:

Treasurer: Phone #: Email:

BILLING INFORMATION

Billing Contact (if different than Treasurer): Email:

Billing Address (if different than Group Address): City: State: Zip:

TAX EXEMPT INFORMATION (if applicable)

Tax ID Number: FEIN Number:

Being exempt from federal income tax does not automatically mean an organization is exempt from sales and use tax in Minnesota. You must apply for the state's sales tax exemption. For more information, visit: <http://www.revenue.state.mn.us/guide/qualifying-nonprofit-exempt-status>

INSURANCE CERTIFICATE INFORMATION

Insurance Certificate Attached Insurance Certificate on File Not Applicable

IMPORTANT RESERVATION POLICIES

- **ONE-TIME USERS:** For one-time users, fees are due at time of application.
- **MULTIPLE-TIME USERS:** Multiple-time users will be invoiced at the end of each month.
- **CANCELLATIONS:** Fees will not be refunded for cancellations. Organizations are allowed to sub-lease their time to other organizations; provided the sub-lessee signs the liability waiver below.
- **CONFIRMATION:** You will receive a Facility Use Receipt confirming your reservation.
- **INSURANCE:** You must provide an insurance certificate that maintains a commercial general liability policy in an amount of at least \$1,500,000 pertaining to the use of the Savage Sports Center by the Licensee, the Licensee's members and employees and all others using the Savage Sports Center at the invitation of or under the authority of the Licensee. All such policies shall name the City as an additional insured.
- **SALES TAX:** Sales tax will be charged unless a copy of the group's tax-exempt certificate is on file or a Minnesota and Federal tax exempt numbers are provided.
- **ON THE HOUR:** To help manage time, the City is only accepting full hour reservations, on the hour (Ex. 4:00pm – 6:00pm not 4:30pm – 6:00pm).

The City reserves the right to exercise supervisory authority and to prevent unauthorized or illegal activities on City property. The City shall not be responsible for interruptions of the use of the facilities for reasons beyond its control, and reserves the right to cancel this permit for reasons of public safety or convenience

Please submit the completed User Group Information Form to cdill@cityofsavage.com



SAVAGE SPORTS CENTER

RENTAL REQUEST APPLICATION

Savage Sports Center | 13450 Dakota Ave. S., Savage, MN 55378 | Office: 952-567-2095
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LIABILITY WAIVER & SIGNATURE

Please Review and Sign

I represent and agree that I have read and understand the information regarding the use of the Savage Sports Center, including cancellations procedures, liabilities, and responsibilities assumed. I further understand that this is only an application for use of the Sports Center, which provides me with no assumed or implied rights for use until written approval is received. I understand that use of the Savage Sports Center and the activities performed therein are voluntary and involve certain inherent risks. I understand that no employee or agent of the City will supervise the use. I understand that the City is not responsible for any injury (or loss of property) to any person while using the Savage Sports Center. I hereby personally assume all risks in connection with use of the Savage Sports Center and agree to hold harmless the City, its elected officials, officers, employees and agents from all claims arising from use of the Savage Sports Center.

Specifically, and without limiting the generality of the foregoing, I agree to save, defend and hold harmless the City for any damages to City personnel, facilities, equipment or other City property, or to the property and/or person of any third party resulting from the use authorized hereby.

Signature of Applicant _____ Date _____

Title of Applicant _____

Please submit the completed rental request application to cdill@cityofsavage.com

OFFICE USE ONLY

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