



# Libertyville Sports & Fitness Complex Room Rental Form

Today's Date: \_\_\_/\_\_\_/\_\_\_

Applicant's Name: \_\_\_\_\_ Organization/Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Purpose of Rental: \_\_\_\_\_ Expected Attendance: \_\_\_\_\_

Is event open to the public? \_\_\_ Yes \_\_\_ No Will an admission fee be charged? \_\_\_ Yes \_\_\_ No

Event Date(s) requested: \_\_\_\_\_

Requested Time: \_\_\_\_\_ am/pm to: \_\_\_\_\_ am/pm **Must include any time needed for prep and/or post event clean up.**

**Room Requested:** Room capacity per setup style (C) Conference (T) Theatre (CR) Classroom (B) Banquet Rounds

\_\_\_\_\_ Party Room 1: (20)

\_\_\_\_\_ Party Room 2: (30)

\_\_\_\_\_ Party Room 3: (30)

\_\_\_\_\_ Conference 3: (C) 32 (T) 91 (CR) 40 (B) 56

\_\_\_\_\_ Conference 4: (C) 32 (T) 78 (CR) 32 (B) 56

\_\_\_\_\_ Conference 3&4: (C) 75 (T) 150 (B) 96

### Rental Equipment:

\_\_\_\_\_ PA system \_\_\_\_\_ w/Microphone \_\_\_\_\_ Wireless Microphone \_\_\_\_\_ Podium \_\_\_\_\_ Overhead

\_\_\_\_\_ Easel(s) \_\_\_\_\_ Flip Chart w/markers \_\_\_\_\_ LCD Projector/screen \_\_\_\_\_ Screen

\_\_\_\_\_ TV/CR/DVD \_\_\_\_\_ Portable CD player/radio \_\_\_\_\_ Dry Erase Board w/markers

\_\_\_\_\_ Conference Call Phone

Please complete and mail back form with deposit information: No cash please, check or charge accepted.

Payable to the **Village of Libertyville**  
1950 N Hwy. 45, Libertyville, IL 60048

**Approved Rentals will be verified with a signed contract and phone call.**

### Office Use Only:

Approved by: \_\_\_\_\_

Contract # \_\_\_\_\_

Deposit amount: \_\_\_\_\_

Date deposit rec'd: \_\_\_\_\_

Date final payment due: \_\_\_\_\_

Final amount due: \_\_\_\_\_

Final payment rec'd: \_\_\_\_\_

Insurance certificate rec'd: \_\_\_\_\_

To Charge **Visa** **Master Card** **Discover**

Account Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Expiration Date \_\_\_/\_\_\_/\_\_\_ Charge Amount \$ \_\_\_\_\_

Authorized Signature \_\_\_\_\_

*Your statement will show this charge paid to Village of Libertyville.*