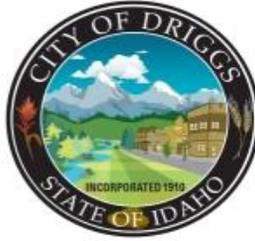


City of Driggs, Idaho
 60 S. Main Street | PO Box 48
 Driggs, ID 83422
 Ph: (208) 354-2362
 Fax: (208) 354-8522
www.driggs.govoffice.com



City Center Reservation Form

Please call the City Clerk at 354-2362 for information on facility description, occupancy load, and availability.

Applicant Name: _____

Phone: _____ **Email:** _____

Mailing Address: _____

Business/Organization/Sponsor Name: _____

Name of Event: _____

Type or Purpose of Event: _____

Number of Participants: _____ **Number of Events:** _____

Date(s): _____ **Time:** _____

1. Venue Location (select all that apply):

- Council Chamber (Government, political, school, & non-profit)...4 hrs or less..\$25 per day
- Council Chamber (Government, political, school, & non-profit)...> 4 hrs.....\$40 per day
- Council Chamber (Commercial & for-profit).....4 hrs or less...\$50 per day
- Council Chamber (Commercial & for-profit).....> 4 hrs.....\$80 per day
- Audio Visual Equipment use..... \$25 per day
- Foyer \$25 per day
- Conference Room (only available after regular business hours)..... \$25 per day
- Plaza, single event..... \$25 per day
- Plaza, multiple event..... \$20 per event
- Key Deposit (forfeited if key not returned)..... \$20 per set

Total \$ _____

2. Will you be serving beer and/or wine ? **YES** **NO**

Permit Needed? Yes No Clerk Approval Date: _____

3. Will you have retail sales at the event? YES NO

Permit Needed? Yes No

Clerk Approval Date: _____

4. Describe your recycling and waste disposal plans for the event: _____

I understand and agree to the terms and responsibilities which are outlined in the Driggs Building Use Policy presented to me at the time the application was submitted.

Applicant Signature

Date

APPROVED BY: _____

City Clerk

Date