

Lake Shelbyville Visitor Center Use Application Form

Please print when completing this form

Name of Applicant– Last, First, MI		Home Phone	Mobile Phone
Organization Name, if applicable			Fax
Street Address	City	State	Zip Code
Email Address	# of People Expected		Age Range
Time From: _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	To: _____	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Requested Reservation Date(s)			

Description and Purpose of Activity

Will food be served?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Projector: <input type="checkbox"/> East <input type="checkbox"/> West
On-site food preparation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Podium: <input type="checkbox"/> One <input type="checkbox"/> Two
Will alcoholic beverages be served? <i>*Notes: Beer and wine only; sale of alcohol not permitted; Providing alcohol to MINORS (under age 21) is PROHIBITED</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Table for computer <input type="checkbox"/> One <input type="checkbox"/> Two
Will kitchen area be needed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please list audio/video cables needed: _____

Tables and Chairs:

18" x 72" folding tables # of narrow tables needed: _____ (12 available)

*Note: These tables will accommodate 3 chairs per table

30" x 94" folding tables # of wide tables needed: _____ (12 available)

*Note: Those tables will accommodate 8 chairs per table

of chairs needed: _____ (90 available)

Other Information: Room is available from no earlier than 8:00 a.m. until no later than 10:00 p.m. daily

Suggested Donations

	# of Days	Unit Donation	Total	Deposit: \$100 (may increase due to the size of event) Total (with deposit): \$ _____
Auditorium		\$300/day		
East 1/2 of Auditorium		\$125/day		
Library		\$25/day		
Outdoor Classroom		\$75/day		
Grand Lobby– see page 2		\$100/day		

Application may be dropped off at the Lake Shelbyville Visitor Center or mailed to:
 U.S. Army Corps of Engineers, Attn: LVA, R.R. 4 Box 128B, Shelbyville, IL 62565
 Suggested donations, deposits and confirmations MUST be received by the Lake Volunteer Association (LVA) no later than 10 working days prior to the event date. **NO REMINDERS WILL BE SENT.**

User Agreement

I have read and understand all the Facilities Use Information and will follow all guidelines and restrictions, as well as any conditions in the Special Use/Event Permit. I also confirm that I am authorized to act on behalf of the organization listed on the application. The undersigned hereby accepts this permit subject to the terms, covenants, obligations and reservations expressed or implied herein.

(Signature of Applicant)

(Date)

LVA OFFICIAL COMPLETES THIS SECTION

I hereby approve and authorize the permittee use of the Lake Shelbyville Visitor Center facility as described in this permit, during the period and for the purposes stated above.

Damage Deposit: Required Not Required Amount: \$
Liability Insurance: Required Not Required Amount: \$

Approved by:

(Signature of Representative)

(Date)

Deposit Received

Payment Received

(Date)

(Date)

Special Event Permit: Required Not Required Prepared

(Date, Initials)

Special Use Permit: Required Not Required Prepared

(Date, Initials)

Other Notes, Special Instructions:

