



Hickman Community Center
115 Locust Street, Hickman, NE
Application for Multipurpose Room (Gym Only)
NO ALCOHOL OR FOOD – ATHLETIC RESERVATION

This application must be approved and filed with the Hickman Activities Coordinator at 115 Locust Street, Hickman, NE at least seven (7) days prior to the event without alcohol. In respect for residents in the neighborhood of the event, note the following time schedules: Sunday-Thursday events end at 10:00 pm, Friday and Saturday events end at 12:00 am.

NO ALCOHOL OR FOOD IS PERMITTED WITH THIS APPLICATION.

(Scanned copies will be accepted, email to activities@hickman.ne.gov)

Date of Event: _____

Event Name: _____

Primary Contract Holder: _____ Phone: _____

Full Mailing Address: _____

Email: _____

Secondary Contact Person: _____ Phone: _____

Full Mailing Address : _____

Email: _____

Please describe activities included in this event:

Start date/time requested to access facility for set-up: _____

End date/time requested to leave facility after clean-up: _____

Estimated number of participants: _____

FOOD

Will there be food served at the event? () YES (**X**) NO

Note: Only water with a sealed lid is permitted during athletic reservations.

ALCOHOL

Are you planning to have alcoholic beverages as part of the event? () Yes (X) No

Note: Only water with a sealed lid is permitted during athletic reservations.

•If alcohol will be available/consumed during the event, a separate application with the City of Hickman and the Nebraska Liquor Control Commission is REQUIRED to procure a Special Designated Liquor License (SDL). Please contact the City Clerk for application or questions regarding the application at 402-792-2212.

Will audio/visual equipment be requested or other special provisions?

Do you require the exclusive use of the facility for your event? () Yes () No

If yes, explain: _____

I have received and reviewed the Rental Guide, Basic Rules & Cancellation Policy _____
 (Initials)

By signing this application, I acknowledge and ensure that every participant attending this event will sign a *City of Hickman Waiver and Release of Liability Form* or I will provide Proof of Insurance ACCORD Certificate naming the City of Hickman as Additional Insured.

Print Name (Applicant)	Signature
Address, City , State, Zip	Phone

Office Use Only

Signature of City Staff _____ Print Name _____ Date _____

Rental Fees	Damage Deposit
Date 100% Rental Fees Received: _____	Date Damage Deposit Received: _____
Check # or Payment Type: _____	Check #: _____
Receipt #: _____	Receipt #: _____

Given to Applicant by City Staff:	
Rental Guide, Basic Rules & Cancellation Policy	<input type="checkbox"/>
Insurance Requirements	<input type="checkbox"/>
Waiver & Release of Liability Form	<input type="checkbox"/>

Event Type: _____

Multipurpose Room (Gym Only) – Athletic Reservation – No Alcohol or Food

All participants must sign a [City of Hickman Waiver and Release of Liability Form](#) or Primary Contract Holder (Applicant) must provide Proof of Insurance ACCORD Certificate naming the City of Hickman as Additional Insured.

Only water with a sealed lid is permitted during athletic reservations.

\$25.00 Per Hour Rental Fee

No Deposit Required

- 100% of the Rental Fee is required to reserve the date.
- Includes use of Multipurpose Room as printed below.

Multipurpose Room

- 103' x 68'
- Maximum Room Occupancy 680
- Tables and chairs for 400 included
- 6 Basketball Hoops/Balls
- Volleyball Net/Balls (1 Court - available by request)
- Pickleball (1 Court: 1 Net, 4 Paddles, and 2 Balls - available by request)
- Dodge Balls (available by request)
- 8' Loading Dock Door
- Outdoor Patio
- Water Fountains
- Restrooms

\$35.00 Per Hour Rental Fee – 2 Court Pickleball ONLY

No Deposit Required

- 100% of the Rental Fee is required to reserve the date.
- Includes use of Multipurpose Room as printed below.
 - Pickleball (2 Courts: 2 Nets, 8 Paddles, and 4 Balls – available by request)
 - Water Fountains
 - Restrooms

\$45.00 Per Hour Rental Fee – 3 Court Pickleball ONLY

No Deposit Required

- 100% of the Rental Fee is required to reserve the date.
- Includes use of Multipurpose Room as printed below.
 - Pickleball (3 Courts: 3 Nets, 12 Paddles, and 5 Balls – available by request)
 - Water Fountains
 - Restrooms

ATHLETIC RENTAL CLEAN-UP CHECKLIST

NO FOOD OR DRINKS – WATER WITH A SEALED LID ONLY

Renter Contact: _____ Date: _____

Primary Contract Holder: _____ Phone #: _____

Check all that apply for rental:

Gym: Tables: Chairs: Kitchen: Bar Area:

Outside Patio: Meeting Rm 128A: Meeting Rm 128B:

Complete walk-through AFTER the event. Please complete "End of Rental" sections.

Common Areas		After Rental	Comments upon completion of event:
<input type="checkbox"/>	All Renters Equipment, Decorations, Supplies Removed (Remaining items will be discarded)		
<input type="checkbox"/>	Restrooms cleaned (Trash removed, toilets cleaned, counters/sinks cleaned, floors cleaned, hand towels and toilet paper restocked)		
<input type="checkbox"/>	Sweep/Mop corridors, <i>if necessary</i>		
<input type="checkbox"/>	Glass Doors Cleaned (no smudges or fingerprints) <i>if necessary</i>		
<i>Cleaning supplies and toiletries are located on the cleaning cart within the kitchen. The key for restocking toiletries is on a "2019" lanyard and located on the Cleaning Cart or in the cabinet labeled "Toiletries".</i>			

Gym		End of rental	Comments
<input type="checkbox"/>	Return all hoops to 10 ft		
<input type="checkbox"/>	Sweep Floors (brooms located in kitchen closet)		
<input type="checkbox"/>	Mop if needed (Mop Room located in kitchen)		
<input type="checkbox"/>	All Garbage and/or recycling bags placed in dumpster, and liners replaced		
<input type="checkbox"/>	Tables and Chairs cleaned and properly stored.		
<input type="checkbox"/>	Report any damage or breakage		
<input type="checkbox"/>	Remove any tape or gum from all surfaces		

Items Reviewed with City Staff:

- ❖ Doorways, hallways, and emergency exits may not be blocked for any reason at any time.
- ❖ Tables and chairs cannot be used outside of the Community Center Building
- ❖ All fire alarm and fire suppression equipment may not be blocked for any reason at any time.
- ❖ Renter and guests may not disturb the peace of any other occupant or member of the public. Lancaster County Sheriff Deputy's or the City of Hickman's employees may enter the building and event at any time during use of the facility. Renter agrees to immediately remove any individual violating this policy from the facility and understands that the City Staff or Law Enforcement may terminate the event if peace cannot be restored by the removal of an individual or would require the removal of more than one individual.
- ❖ City of Hickman facilities and uses are subject to the Americans with Disabilities Act and the renter agrees to comply with the ADA requirements. All requests for accommodations can be made by contacting the City of Hickman at 402.792.2212.

- ❖ Only certified service animals are permitted in the Hickman Community Center. This condition may be waived in rare circumstances for certain events upon prior arrangement with the City and payment of an additional security deposit in an amount to be set forth depending on the size and number of animals, at a minimum of \$500. Renter is responsible for all damage caused by animals, including service animals.
- ❖ Lock/Unlock Building Doors. Secure the building and ensuring follow up all exits are secured upon leaving the event. *The doors are scheduled to lock and unlock at the specific times requested by the renter on the Rental Application.*

BEFORE EVENT: I have reviewed and agree to all terms and current conditions of each pertinent building area(s) as outlined above.

RENTER BEFORE EVENT Signature: _____ **Time-In:** _____

Facility Staff Signature: _____ **Date:** _____

AFTER EVENT: I have completed a walk-through of the facility and performed the tasks stated above. Everything has been left in good order, as it was found, except as noted above. By my signature below, I am acknowledging cleanliness and condition of the facility and equipment after the rental group activity.

RENTER AFTER EVENT Signature: _____ **Time-Out:** _____

Facility Staff Signature: _____ **Date:** _____

The completed Rental Clean-up Checklist must be signed by the renter and left in the same location following the scheduled event.