



340 1st Avenue East, Dyersville, Iowa 52040 • Phone: 563-875-7724 • Fax: 563-875-8238
www.cityofdyersville.com

RESERVATION FORM | SIGNATURE PAGE

Date Event is requested: _____

Event Time: _____ (Front doors of building will be unlocked for guests during this time)

Door Code: _____ (4 digits to use at front door)

The Social Center will open no earlier than 7:00 a.m. and will close no later than 10 p.m. Following the event, one hour or up to 11:00 p.m., the renter will be allowed time to gather their personal items/equipment and clean-up. All participants and equipment must be out of the facility by 11:00 p.m.

Type of Room(s) for the event: (Circle Room(s) requested) Room A | Room B | Dining Room

Name(s) as to appear on account: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell Phone #: _____

Social Security Number: _____ Date of Birth: _____
(Only required if you don't own property in the City)

Federal I.D. Number: (Business only) _____

Email Address: _____

By your signature below, you agree that you understand the Dyersville Social Center Use and Policy Agreement and agree to abide by its terms in particular **no tape of any type allowed on any walls or windows**. The Use and Rental Policy Agreement is available for review at www.cityofdyersville.com.

Date: _____

Renter

City

OFFICE USE ONLY

Date: ____/____/____ Rental: _____ Deposit: _____ Total: _____

Cash/Check #: _____ Staff Initial: _____ Deposit Refund: _____