

Clayton County Conservation Board

Shelter House Agreement

SHELTER HOUSE RESERVATION / AGREEMENT

Name: _____

Address: _____

City: _____ State: _____

Phone: _____

Date of: _____ Location: _____ Date Requested: _____ Date Paid: _____

Type of Event: _____

Shelter Reservation \$20-\$40

Wedding \$100 & \$100 Cleanup Deposit

Alcohol \$100

RENTAL FEE:

_____ Half-Day **4 Hours** Time in: _____ Time out: _____ **\$20.00**

_____ Full Day 8:00am-10:30pm (Outdoor Shelters) **\$40.00**

8:00am-4:00pm (Welcome Center Spaces)

OFFICE USE ONLY:

Date Approved: _____

By: _____

Check #: _____

Amount: _____

Reservations are on a first come-first serve basis.

Your paid fee guarantees your reservation.

Your reservation permits you to use one CCCB shelter house _____ provided no other party has secured the use of these facilities with a paid reservation.

- 1. Shelter house hours** are 8:00 a.m. to 10:30 p.m. **Shelter must be cleaned and vacated by 10:30 pm. Welcome Center space hours are 8:00am-4pm.**
2. Clayton County Conservation Board will not be responsible for any injuries that occur while at the Park.
3. The Park is an enjoyable place for all to use. Please do your part to keep it clean. **Please place all trash in park dumpsters before leaving. Replace tables to their proper position in the Shelter House. Please clean-up all spills on the floors, sweep and wipe off tables. A clean-up fee will be billed to the person reserving the shelter house if the items above are not properly attended.**
4. Vehicles are permissible to shelter house **only** for unloading/loading supplies and/or handicapped accessibility. Once the delivery is made, the vehicle should be returned to the parking lot.
5. If tents are to be used at your event, **prior permission and location need to be approved by CCCB staff.**
6. All reservations with the Clayton County Conservation Board **and the \$4 Processing Fee** is **NON-REFUNDABLE**. If the Clayton County Conservation Board is unable to provide your facility (or like facility) in operable condition for the date of your reservation(s) a refund will be issued upon request.

If you agree to the above terms **sign and return with payment** to the **Clayton County Conservation Board, 29862 Osborne Road, Elkader, IA 52043**
Make check payable to: CCCB.

Signature of Applicant: _____

Date: _____