

Cedar Lake Pavilion

Lessee's name: _____ Phone #: _____

Address: _____

Type of event or group/organization name: _____

Event date: _____ Hours requested: _____

Pavilion Information-Open to the Public and Available for Rental Use

The pavilion is open to the public, and is available for private parties. Bathrooms are always open to the public. The pavilion is handicap accessible, includes a kitchen with multiple outlets for Nescos and restrooms, 10 picnic tables which are 8' long and seats approximately 80 people. Also provided is grilling station, toilet paper, trash containers and dish soap. NO phone, lighter fluid, or charcoal is provided.

Reservations

To make a reservation you must call 1-920-894-1609 or E-MAIL AT Tammy@The-Cedars-Resort.com. You must send a payment of 50% of the total rental cost with photo ID, check or cash at the time of booking to hold the pavilion. Please note you must be 18 years of age or older to place a reservation. Restroom facilities are open to the public. Keys for the kitchen can be picked up at the The Cedars Resort.

Times Available

The pavilion will be available for use at 9:00 a.m. unless other arrangements are made and will be cleaned and vacated no later than 10:00 pm.

Rates & Payment

\$200.00 per day. Payment is expected in full at the time of check in. Check, Cash, Credit Cards, Money Order, or Travelers Checks are accepted.

Rules & Regulations

There are permanent residents nearby, please respect them at all times. Responsibly quiet after 10:00 PM.

1. Lessee agrees to abide by all Rules and Regulations.
2. Applications will be processed on a first come first serve basis.
3. The person signing the application must be present at the function.
4. All garbage will need to be disposed in the community garbage.
5. Lessee agrees to leave the facility cleaned and approved by bar manager. If facility is not left clean an additional charge of \$25.00 for cleaning will be billed to the responsible party.
6. Additional fees will be charged for damages.

I assume responsibility for all liability, understand that failure to abide by the above items or damage to the property and/or its contents will result in the forfeit of my security deposit.

SIGNATURE _____ **DATE** _____

Please return to:

Cedars Choice, LLC.
Attention: Tammy Brickner-Dexter
14136 Cedar Lake Road
Kiel, WI 53042
920-894-1609

FOR DEPARTMENT USE ONLY

Application Received By _____ Date _____

Payment Received _____ Date _____ Balance _____ Date _____

Facility Inspected By _____ Date _____ Time _____

Was Facility found to be returned to original condition and clean. Yes _____ No _____