

Community Building Room

Rental Information Form

Please complete the following information.

Contact Information

Contact Name: _____ Organization/Event Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Email Address: _____ Number of Guests? _____

Date(s) requesting (1st Choice, 2nd Choice, ect...) _____

Time requesting _____

Which Room are you interested in using?

- Cedarholm Community Room
- Green View Room (South)
- Golf View Room (North)

Are you considering any of the following options?

- Food Catering
- Partial Kitchen Use
- Alcohol Catering
- Technology Equipment
- Dance Floor

Is there any other information you would like us to know about this event?

How would you prefer to be contacted?

You will be contacted within Three business days regarding your request.

Please note, this form is a request for information and is NOT a reservation.

For more information, contact Steve at steve.anderson@cityofroseville.com or 651-792-7154.

*or save form and send to
steve.anderson@cityofroseville.com*

Cedarholm Office Use Only		Manager Signature: _____	Date Accepted: _____
Rental Room: _____	Ren. Fee: \$ _____	Due: _____	Security Dep. Received: \$ _____
Date of Event: _____	Time: _____	Permit #: _____	Security Dep. Return By: _____
Food Caterer: _____	Dance Floor Notes		Security Dep. Returned (10 days): \$ _____ Ret. Date: _____
Licensed: _____	Date Due: _____	_____	Notes: _____
Liquor Caterer: _____	Audio/Visual Notes		Setup Notes: _____
Licensed: _____	Due Date: _____	_____	_____