

Park Rec  
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JUN 20 2014

**MANITOWOC PARK & RECREATION DEPARTMENT  
SPECIAL CONSIDERATION FOR WAIVER OF PART OR ALL FEES  
FOR USE OF CITY FACILITIES OR EQUIPMENT**

DEPT. OF PUBLIC WORKS

Groups/Organizations requesting special consideration for waiver of all or partial fees ordinarily charged to groups for use of City owned facilities or equipment must fill out this form completely, at least 30 days in advance of the event. The request will be reviewed by the Park and Recreation Committee and the group or organization will be notified within 15 days of submitted request.

A CURRENT FINANCIAL REPORT FOR THE PREVIOUS TWO (2) YEARS INDICATING ALL EXPENSES AND ALL REVENUES OF THE GROUP/ORGANIZATION MUST ACCOMPANY THIS FORM PRIOR TO THE COMMITTEE REVIEWING THE REQUEST.

ALL QUESTIONS MUST BE ANSWERED

1. Name of Club or Organization making request Mishicot Marvels 4-H Club  
Address \_\_\_\_\_ Telephone \_\_\_\_\_

2. Names of Club Officers: Name Club Leader: Kevin Stoer Address \_\_\_\_\_ Telephone \_\_\_\_\_

President \_\_\_\_\_

Secretary Abby Sinkula 12603 Meyer Rd, Two Rivers 920-973-0755

Treasurer \_\_\_\_\_

3. Facility requested: Information Center at Lincoln Park Zoo

Equipment requested: Table & Chairs

4. Specific Dates and Hours facility/equipment will be used: Date July 10, 2014 Hrs. 5:00 to 7:00

5. Please explain your request, as to what fees you desire waived or reduced and reasons.  
The \$50 fee for the center.

6. Which do you consider your group to be?  
A. Community Service \_\_\_\_\_ B. Non Profit X C. Private Business \_\_\_\_\_  
D. Club or organization \_\_\_\_\_ E. Other, please explain \_\_\_\_\_

7. Will money be collected, tickets sold, concessions sold or money raised in conjunction with the event?  
Yes \_\_\_\_\_ No X Club wants to have it's summer picnic at the zoo.

8. If Yes, explain and list specific charges N.A.

9. What will revenues be used for? N.A.

10. Do you wish to meet personally with the Board/Committee to discuss this request? Yes \_\_\_\_\_ No X  
If yes, please provide the following information of individual to contact.  
Name Roger Sinkula Address 12603 Meyer Rd Telephone 920-973-0755

Signed Roger Sinkula Date June 17, 2014

Please attach any additional information which you feel will assist the Committee in evaluating your request.

When completed, this form is to be returned to The Manitowoc Recreation Department, 930 North 18th Street, Manitowoc, WI 54220.

Committee Action: Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_