Facilities Management

Oak Point Community Center
Leech Lake Reservation

Name of Group or Family’s Last Name: ____________________________________________
Contact Person: ______________________ Telephone #: _____________________________

What are you holding?
☐ Wake ☐ Funeral ☐ Memorial Dinner ☐ Meeting ☐ Birthday Party ☐ Baby Shower
☐ Other __________________________________________________________

Date(s) Needed: _______________________________________________________________________

(Time(s) used for Wake/Funeral you DO NOT have to answer the following questions)

Time of use: ___________________________________ ☐ AM ☐ PM To: ___________________________________ ☐ AM ☐ PM

Equipment needed: ____________________________________________________________________

Children must be supervised at all times and security must be provided for large groups of children.
Individuals requesting use of the building must be at least 18 years of age. Requests are subject to
adjustment and review. Reservation Business and Community Councils have priority over other areas.

Wakes and/or funerals will be given first priorities NO EXCEPTIONS!
(If there is a wake on the day you requested you would/will be automatically denied.)

I am signing this knowing that I have to follow all the above.

Date: __________________ Requester Signature: ____________________________________________

Not approved: ☐ Approved: ☐

Building Manager________________________________________ Date: ____________________________

Denied (Reason) __________________________________________

Other Information: ________________________________________ Date confirm with JC: ________________

Facilities Management Department
Telephone Number: (218) 335-8318 Fax Number: (218) 335-4421