Como Falls Park Wedding Information  

Thank You for your interest in Como Falls Park. The City of Hokah welcomes you to share in the beautiful surroundings that our facility offers. It is open year around for use by persons on a first come first serve basis. There have been occasions where two weddings were performed at the same time in the park.

The Fire Department Community Room adjoins Como Park. This would be for changing & dressing, restrooms, kitchen facilities, tables and chairs, etc. The facility is air conditioned. It also could afford the actual Wedding Ceremony during times of inclement weather. Weddings frequently have elderly attending, and there are no sidewalks, just grass and gravel in the Park. Further there is sparse cell phone coverage in the Falls area. There is a phone in the Fire Department Community Room. Seating Capacity is 90 Persons. The tables and chairs are to stay in the community room. If you need chairs for your Wedding Ceremony at Como Falls, you will have to contract that with a provider. No parking blocking Fire Bay Doors.

Rental Fees for partial day:  

City Resident $ 50.00  

Non-Resident $100.00

City of Hokah web page:  
http://goo.gl/CLy34

Map of Hokah:  
http://goo.gl/SCcDM

Como Falls Web Page:  
http://goo.gl/xe5zB

Building rental contract:  
http://goo.gl/u2bdx

If you are serving alcohol we require an insurance rider indemnifying the City. Your Insurance Company should supply you a Certificate of Insurance to extend coverage to the City of Hokah for your event. If not an alternative is here:

http://goo.gl/8NE1U
Unless you make preparations in advance, Como Falls Park is not equipped to accommodate your actual Wedding Reception as there are no bathroom, electrical, lighting, and shelter options available. The Hokah City Hall at 57 Main Street is available for your Wedding Reception. The building is air conditioned and has kitchen facilities. Seating capacity is 200 Persons.

City Hall Rental fees:                  City Resident: $125.00                  Non-Resident: $200.00

FOR RESERVATIONS:

1. For event date availability, check the Calendar for the City of Hokah here:  https://goo.gl/CQnD5y

2. Email:  hokahfacilities@acegroup.cc with your name, date requested email and phone number. We will return your email within three days.

3. If you don't have internet or email, call 507-894-4990 and leave a message with your information. We will return your call.
BUILDING RENTAL CONTRACT
102 Main Street / PO Box 311 Hokah, MN 55941
Phone: (507) 894-4990          Fax: (507) 894-3777          Web: www.cityofhokah-mn.gov

RENTER: ________________________________________________

Address: ____________________________ City: ___________________ State: _____ Zip: __________
Daytime Phone: _________________________ Cell Phone: ________________
Date of Facility Use: ____________________________ Purpose: ____________________________
If Wedding, Location of Reception: ____________________________

Alcohol at Event? ___ Yes ___ No

BUILDING RESERVED
(Please Circle One Below)

CITY HALL   FIRE DEPARTMENT   LEGION BALL FIELD   VETERANS PARK   OTHER
57 Main St.   9 Mill Street   1St. Street   4th. Street   _________

NOT CURRENTLY ADA COMPLIANT

Facility Usage Policy
The City of Hokah facilities may be utilized for any lawful use that will not be injurious to the property or to
individuals. The determination of lawful use shall be made by the City of Hokah in consultation with the City
Attorney. An event contact person shall be present during contracted use of the facility and must be in
possession of this Contract whenever it is required to be produced by a member of the Hokah Police
Department, Houston County Sheriff, or other Officials. City of Hokah may require, and applicant shall furnish,
supplemental information when, in the opinion of the City of Hokah, such information that is necessary to ensure
adequate safeguards for the protection of the property of the City of Hokah. RENTER agrees to pay all costs for
damages. If damages are found, or clean up is necessary you will be billed.

In addition, the RENTER shall be liable to any person who shall receive actionable injury through the exercise
thereof, and shall also hereby agree to hold harmless the City of Hokah, its duly elected officials and appointed
officers from any and all claims of negligence and harm associated directly or indirectly with RENTER'S or patron's
use of said facility. Proof of liability insurance naming the City of Hokah as co-insured will be required for any
events that are serving alcohol. The fees for janitorial, police and fire services shall be at the rates established by the
City of Hokah. Where indicated, Hokah Police and Fire Departments must be notified to make arrangements to
attend event. Payment is made to the City.

Because of the significant demand for buildings, the Renter's hold on a particular location is not official until this
Rental Agreement has been completed, submitted and the deposit has been paid. Renters are encouraged to
secure an official reservation as soon as possible. A schedule of current reservations is available here:

https://goo.gl/CQnD5y

_____________________________ _______________________________ __________/________/_________
Signature of RENTER                   Printed Name           Date
Cancellation. If the Renter cancels their reservation at least two months in advance of the reserved date, 100% of their Deposit will be refunded. If cancelled with less than two months’ notice, the Deposit will not be refunded, but the Renter will have no further obligation. Since a late cancellation means that another renter will not likely be found for the date you reserved, unfortunately there are no exceptions to this policy.

Alcohol. The Renter will be subject to ejection and prosecution for the consumption of intoxicating beverages by minors, whether it is occurring with or without the Renter’s knowledge. Absolutely no sale of intoxicating beverages is allowed without permit. The Renter shall indemnify and hold the City harmless for any liability introduced by the consumption of alcoholic beverages upon city property during the rental period.

Nuisance. The Renter is responsible for the conduct of guests during the rental period, causing a public nuisance may, at the discretion of the Police Department, be grounds for ejection from the facilities.

Parking. Parking is permitted on-street or in designated areas only. No parking by Fire Department Bay Doors.

Keys. Keys to the buildings are available at Hokah Kwik Trip, 477 North Mill Street 507-894-4800. The keys must be returned as soon as possible following the event. Renters shall be responsible for the cost of replacing lost or damaged keys, or re-keying the facilities.

Tables and Chairs. The City provides Tables and Chairs at both the Fire Department and City Hall locations. The provided items are for use in that particular location only. No tables and chairs are to be removed from buildings.

Minimum age. Renters must be at least eighteen years of age, and the event must be supervised by a responsible adult eighteen years of age at all times.

Refunds. There are no refunds in part or in whole of rental fees, due to inclement weather, messy facilities, or for any other reason. At times the facilities are rented for several consecutive days by different patrons, so the condition of the shelter is dependent upon how well the previous renter adheres to this Rental Agreement. If the facility has not been adequately cleaned when the Renter takes occupancy, they are encouraged to photograph the preexisting condition to assist the City in dealing with that previous renter. You will be expected to leave the building & area in good condition at the end of your event.

RENTER has read and agrees to all provisions as set forth in this contract. This contract does not prevent the City from canceling this contract to schedule elections, municipal meetings, or other official City business if emergency circumstances dictate. The City of Hokah will notify the RENTER as soon as possible if such emergency circumstances arise.

INSURANCE. Renters MUST provide a Certificate of Insurance to the City of Hokah if ANY alcohol will be served, or consumed on premises. Contact your Insurance Provider for assistance. If you are unable to provide this coverage, the City participates with the League of Minnesota Cities in the TULIP (Tennant User Liability Insurance Program). Contact Us for more information. Any associated fees are the responsibility of the Renter.

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## FEES SCHEDULE

<table>
<thead>
<tr>
<th>FACILITY</th>
<th>RESIDENT</th>
<th>NON-RESIDENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY HALL -Seating Capacity 200</td>
<td>125.00</td>
<td>200.00</td>
</tr>
<tr>
<td>FIRE STATION -Seating Capacity 60</td>
<td>125.00</td>
<td>200.00</td>
</tr>
<tr>
<td>Meeting Fees Are For Both Buildings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>All Day</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meeting &lt;2.5 Hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hours 50.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meeting &gt;2.5 Hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hours 100.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PARK SHELTERS PER DAY (NON-REFUNDABLE)</td>
<td>35.00</td>
<td>35.00</td>
</tr>
<tr>
<td>BALL DIAMOND per WEEKEND DAY (NON-REFUNDABLE)</td>
<td>50.00</td>
<td>50.00</td>
</tr>
<tr>
<td>(Non-Sofball)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CITY HALL &amp; FIRE DEPT. Per Day (Birthday, Shower, Graduation, Wedding Ceremony)</td>
<td>50.00</td>
<td>100.00</td>
</tr>
</tbody>
</table>

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## CLEANUP FOLLOWING YOUR EVENT:

<table>
<thead>
<tr>
<th>PICKUP ALL TABLES AND CHAIRS</th>
<th>REPLACE GARBAGE BAGS</th>
</tr>
</thead>
<tbody>
<tr>
<td>SWEEP THE FLOOR</td>
<td>WIPE DOWN COUNTERS</td>
</tr>
<tr>
<td>TAKE OUT ALL TRASH TO DUMPSTER</td>
<td>RETURN KEY TO KWIK TRIP</td>
</tr>
</tbody>
</table>
TULIP APPLICATION
Tenant Users Liability Insurance Program – Application for Special Event Liability Insurance
To be completed by the Tenant User
City of Hokah, MN  Facility Code: 0501  AVH

1. Name of Lessor: _____________________________________________________________
2. Street & Mailing Address: ______________________________________________________
3. Applicant/Tenant User/Name of Group: _____________________________________________
4. Location of the Covered Event: ___________________________________________________
5. Mailing address of Tenant User: ________________________________________________
6. Contact Name: __________________________________________________________________
7. Telephone Number: _______________________ Fax Number: __________________________
8. Event Dates:   From: __________________________  To:______________________________
9. Number of Days: __________________________________________________________________
10. Description of Event: __________________________________________________________________
11. Describe, in detail, any special effects, pyrotechnics, use of mechanical devices, etc.: ______________
12. Will liquor be served? ☐ Yes  ☐ No;  If yes, please answer the following:
   a) Who holds the license? _________________________________________________________
   b) Type of liquor to be served? ___________________________________________________
   c) How will you ensure that patrons are over 21 years of age? ________________________
   d) Estimated liquor sales:_________________________________________________________
13. Is security armed or unarmed? ☐ Armed  ☐ Unarmed _________________________________
14. Is the event indoor or outdoor? ☐ Indoor  ☐ Outdoor ________________________________
15. Estimated amount of spectators? _________________________________________________
16. Estimated total receipts: _________________________________________________________
17. Number of concessionaires, vendors and exhibitors requiring coverage:
   a. Non-food concessionaires:_________________________  b. Food concessionaires ______________
   c. Vendors: ________________________________________  d. Exhibitors: __________________________
18. Number of Performers requiring coverage: _______ Describe in detail each performer’s act: ___________
   ________________________________________________________________________________
19. If there are any Additional Insureds, please describe and name any persons in questions 17 and 18:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

20. If the event is being held on a street or public place of vehicular access, what protection is being set up between the street and the sidewalks? _____________________________________________________

21. Has the event been held in the past?  □ Yes  □ No; If yes how many years? ____________________

Provide details of any losses, claims or incidents, insured or uninsured: _____________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

I certify that the information given to obtain this coverage is accurate to the best of my knowledge.

Date Signed:__________________

Applicant’s Signature: _____________________________________

By: ____________________________________________________

PLEASE NOTE

• No coverage is provided by this policy unless an application has been submitted and a premium has been paid.
• No coverage is provided for liquor liability unless the submitted application includes a premium payment for liquor liability.
• No coverage is provided by this policy for paid professional entertainment or talent unless specifically endorsed hereon.
• This insurance does not apply to “Bodily injury” or “Personal injury” or death of any person while rehearsing or practicing for, participating in, or travelling to or from any contest or exhibition of an athletic, dance, or sports nature.

Premium payment by the Applicant must be made when the application is submitted. Payment should be made payable to:

A Certificate will be issued naming your group as a “Named Insured” for the above event. The Program Sponsor, the “Additional Insured” will receive the Certificate, with a copy to you, the Tenant User.