

AGREEMENT FOR STRUCTURED USE OF MEMORIAL PARK

NAME OF EVENT: _____

APPLICANT NAME: _____

APPLICANT ADDRESS: _____

APPLICANT PHONE NUMBER: _____

BUSINESS NAME, ADDRESS, PHONE NUMBER (IF APPLICABLE)

DATE AND TIME OF EVENT: _____

HOURS OF THE EVENT: _____ TO _____

ANTICIPATED NUMBER OF PEOPLE: _____

AREA OF PARK REQUESTED (CIRCLE ALL THAT APPLY):

PAVILION

RINK

PICNIC AREA

Deposit Charged: \$100.00 Received By: _____ Date: _____

By signing this agreement, the above agrees that no alcoholic beverages will be served on Village property; non-alcoholic beverages and food are allowed. Parking is limited to the designated parking area at the park; additional parking is the responsibility of the event holder. Clean up is the responsibility of the event holder. The Village will return the above deposit, less a \$35.00 administrative fee, following an inspection of the clean up. If necessary, Village personnel will clean up the property and the cost will be deducted from remainder of the deposit.

Signature of Applicant: _____

Issued By: _____ Armada Village Clerk on: _____

Inspection Date: _____ By: _____

Condition Report: _____

Deposit Refund: \$ _____

Check # _____

Date of Refund _____

cc: Armada Chief of Police
Applicant/File