

FACILITY RESERVATION APPLICATION/PERMIT

(** Applicant Must be District Resident **)

Responsible Party Name:			Facility Location:		
Address:					
City:			Hours:	a.m./p.m. TO a.m./p.m.	
Phone:			Nos. of Persons:		
Sponsor/Organization:			Purpose of Event:		
Special Requests:					
All liter must be Additional securitents, booths, state Absolutely NO ground in cansulf required by the and shall be soled. A copy of this period of the applicant shapermit. The applicant shapermit. The applicant Facilities wright Farms Mapermits. Cancellation or deposit fee. USE OF THE PAVILIONS PERMIT FEE. REPAIL BASED ON COST OF	removed from ty or traffic of ands, canopie lass bottles of s, boxes, or p e District, the ty responsible rmit must be aforcement per all be response cant shall be etropolitan D ate changes ON AND DIS LATION OF MAY RESU RS OR CLE SERVICE.	deposit fee via check m Facilities at termina control measures are to setc. are prohibited vor containers are allow lastic containers. It permit holder shall at the for the timely delived in the possession of the possess	ation of use. The responsibility without the experience of the experience of the applicant of the applicant of the applicant of the any and all of the experience of the responsibility of the respons	plication submittal. ility of the applicant, if necessary. Appress written consent of the district. strict park or shelter. All beverages must be rtable sanitation facilities/comfort stations d costs thereof. or designated representative and presented to be actions of the parties represented by this lamages resulting from activities involving any kind in the issuance or enforcement of servation may result in loss of any required because of the district's rules and presented by this lamages resulting from activities involving any kind in the issuance or enforcement of servation may result in loss of any required because of the district's rules and district rules are rules and district rules and district rules are rules are rules and district rules are rules and district rules are rules are rules are rules are rules are rules are rules and district rules are ru	
Signature of Applicant	Date: Remainder of Form to be Completed by the District				
	<u>Ken</u>	nainder of Form to be	Completed b	by the District	
Approved:				Date:	
Deposit Total:	\$50.00	Paid: Check	on	(date)	

Additional Conditions: