CITY OF BELLE

PARKS AND RECREATION

PAVILION & FACILITY APPLICATION

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| ***To be completed by Applicant:*** |
| ***Please Note: Please see that attached guidelines for renting/reserving the park and fees required. It is recommended that the pavilion and/or facility application be made at least 60 days prior to use date. Use of complete park is contingent upon approval. Thank you.******Facility You Wish To Rent and/or Reserve:******Entire Park: \_\_\_\_\_\_\_\_ Pavilion: Small \_\_\_\_\_\_ Large \_\_\_\_\_\_\_ Other\_\_\_\_\_\_******Ball Field: Tiger Field\_\_\_\_\_\_\_ Big Field \_\_\_\_\_\_\_\_******Date of Event/Function: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** ***Month/Day/Year Day of Week******Time of Arrival: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Departure: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_******Attendance Estimated: \_\_\_\_\_\_\_\_\_\_ Type of Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_******Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_******Address of Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** ***(Street or P O Box) (City, State, Zip Code******Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** |
| ***Compliance with Laws and Facility Rules: Guests shall at all times maintain proper conduct and decorum and shall comply with all laws, ordinances, rules, and regulations of park facilities. Damage to the Facility & Property: Reimbursement to the City of Belle for all damage to the pavilions and property arising from any activity caused by the guests, employees, agents, or affiliated persons will be required. Ordinary wear and tear is expected. Damages to park property could affect future use approval. Insurance:*** ***At the discretion of the City of Belle and/or Belle Fair Board, insurance may be required for some events.*** |
| ***I and all other members of my organization, group, or party do hereby agree to the above rules, regulations, and guidelines, and accept responsibility for compliance.******\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** ***Signature of Applicant Date*** |