



2015 APPLICATION FOR USE OF PARK FACILITY

MT. PLEASANT PARKS AND RECREATION
320 W. Broadway Street, Mt. Pleasant, MI 48858-2447
Office Telephone: 989-779-5331 Fax: 989-773-6790

Office Hours:
Monday - Friday
8:00 a.m. to 4:30 p.m.

INSTRUCTIONS: Complete all information requested. Return this application form to Mt. Pleasant Parks and Recreation at the above address. Upon department approval, a permit will be provided to you. **You must have this permit on site during use of Park Facility.** Full payment is required at the time of application.

CONDITIONS: All shelter applications and use of shelters are subject to the conditions listed on the reverse side of this form. Please take time to review these conditions before completing this form. Your signature below acknowledges your understanding and acceptance of these conditions.

PLEASE NOTE: CERTAIN TYPES OF FACILITY USE MAY REQUIRE A SPECIAL USE PERMIT ISSUED BY THE CITY PARKS DEPARTMENT, CITY CLERK'S OFFICE, OR CITY POLICE DEPARTMENT. PLEASE INQUIRE WELL IN ADVANCE OF YOUR REQUEST.

APPLICANT (Person or organization responsible for use of facility and its guests during use.)

PRIVATE INDIVIDUAL ORGANIZATION/BUSINESS: Profit Non-Profit - Fed ID # _____ *required*

Applicant Name _____ Home Telephone _____

Sponsoring Organization _____ Work Telephone _____ Ext. _____

Address _____ City Resident Township/Other _____

City _____ State _____ Zip Code _____

PLANNED USE AND NEEDS

Purpose of Gathering Family Reunion Small Club or Business Meeting Large Picnic (100+) Pig Roast*

Special Permission and/or Permits Required Community Event Benefit/Fund Raiser* Wedding* Reception*

Please fully describe the planned use of shelter facility and any EXTRA ACTIVITIES OR EQUIPMENT to be brought into the park (RESTRICTIONS, PRE-APPROVAL AND ADDITIONAL PERMITS MAY APPLY) :

Group Size: _____

Music at Event No Yes, Live Amplified *Specify:* _____

Alcohol at Event No Yes *⊗ You may not sell alcohol and you may not have glass containers in any City park. Alcohol prohibited in Mill Pond Park.*

Special Needs Electric ON Lighting (if available) ON Water for (please be specific) _____

NONE Other (Please be specific. Attach add'l sheet if necessary) Sand volleyball court Softball field

REQUESTED RESERVATION DATE AND TIME (Limit one facility and one date per form.)

Date of Use (mm/dd/yyyy) _____ Day of Week: Su M Tu W Th F Sa

Setup/Arrival Time No earlier than 9:00 AM AM PM Event Start Time AM PM Departure Time AM PM Park closes at 11:00 p.m.

REQUESTED FACILITY USE

✓ Refer to facility brochure for details and fees.

*Note: Half shelters available at Island Park Only

Park Name _____ Facility Name (SEE BROCHURE) _____

Fee Due

Full E 1/2 W 1/2

\$

Full E 1/2 W 1/2

\$

TOTAL FEE DUE

Make checks payable to: *Mt. Pleasant Parks and Recreation*

\$

APPLICANT AGREEMENT: I have read, understand, and agree to abide by all of the rules and conditions provided in this application, as well as comply with all City and park ordinances, rules and regulations, as applicable.

Applicant's Signature: _____ Date: _____

Driver's License # _____ E-Mail: _____

OFFICE ONLY - PERMIT AND PAYMENT APPROVAL

Approved Denied Authorized By: _____

Authorization Date: _____

PAYMENT METHOD Cash \$ _____ Internal Dept. Use
 Check \$ _____ (# _____) RecTrac Rsv # _____
 Other RecTrac Entry _____

Permit Approval/Issuance Stamp

This is a valid permit only when authorized permit stamp appears