

TOWN OF OTTAWA

FACILITY USE AGREEMENT

This form must be completed in its entirety and submitted to the Town of Ottawa, W360 S3337 Hwy 67, Dousman, WI 53118. A signed copy authorizing the use of the requested facility will be returned to requesting party prior to the use of facility. The appropriate fee should accompany request.

1. NAME OF PERSON AND/OR ORGANIZATION REQUESTING FACILITY:

2. EVENT OR PURPOSE: _____

3. SPECIFIC DATE(S) REQUESTED: _____

4. TIME OF DAY REQUESTED: From: _____ To: _____

5. ESTIMATED ATTENDANCE: _____

6. CHECK THE LOCATION/PERMIT DESIRED:

____ North Diamond

____ Volleyball courts

____ East Diamond

____ Picnic Area/Shelter

____ West Diamond

____ Pavilion (½ or Full)

____ T-Ball fields

____ Alcohol permit (no glass containers)

7. DATE OF APPLICATION: _____

8. PRINT NAME, ADDRESS AND PHONE # OF APPLICANT:

Name _____

Address _____

City, State, ZIP _____ Phone _____

SIGNATURE OF RESPONSIBLE PARTY _____

* Responsible Party is defined in Park Rules above

TOWN of OTTAWA Personnel below

RENTAL FEE (if required): _____

AUTHORIZATION STATEMENT: You are authorized to use the facilities requested above.

A. Minimum limits of Liability Insurance: _____

B. Exceptions to areas requested: _____

AUTHORIZED BY: _____ DATE: _____

Park Supervisor or Town Park Supervisor