



**Alcohol Consumption Permit**  
**Fee: \$20.00**

Facility: \_\_\_\_\_ Date requested: \_\_\_\_\_

Time of use: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

The applicant, by signing below, agrees and certifies that:

(Initial) \_\_\_\_\_ Applicant will ensure that all participants comply with all laws and ordinance regulating the consumption of beer/wine.

(Initial) \_\_\_\_\_ No underage person will be allowed to consume beer/wine.

(Initial) \_\_\_\_\_ Anyone who appears legally intoxicated will be refused further beer/wine and will be immediately furnished transportation home.

(Initial) \_\_\_\_\_ All beer/wine containers will be properly disposed of.

(Initial) \_\_\_\_\_ Applicant will protect the City from any liability resulting from the breach of this agreement or from the consumption of beer/wine on City property.

(Initial) \_\_\_\_\_ Applicant acknowledges this permit may be revoked for failure to comply with its terms.

**Waiver of Liability**

I hereby certify that I have read and understand the policies and procedures regarding the use of public facilities. I further agree to hold the City of Whitefish, it's governing board, the individual members thereof and all officers, agents and employees free and harmless of any loss, damage, liability cost or expense that may arise during or be caused in any such use or occupancy of City property.

Applicants signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*Office Use Only\*\***

Batch # \_\_\_\_\_ Employee Initial/Date: \_\_\_\_\_