



## Private Use Application Form

**Facility/Park Requested:** \_\_\_\_\_

**Date (Dates) of Use:** \_\_\_\_\_

**Time of Use:** \_\_\_\_\_

**Anticipated Attendance:** \_\_\_\_\_

(Include prep and cleanup time)

**Description of activity in detail:**

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**Organization/Business Name:** \_\_\_\_\_

**Non-Profit Organization: Yes / No**

**If yes, please provide Non-Profit identification number:** \_\_\_\_\_

**Name of Representative:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

## Policies and Regulations

- A facility use application must be completed 30 days (\*60 days, see below) in advance per special event & group function and can only be submitted one year prior to the event.
- Only persons 18 years of age and older may rent public facilities. To complete the application process, park staff must verify age of applicant via visual inspection of a photo ID or obtain a copy of photo ID.
- The City of Whitefish discourages consecutive group functions & special events.
- Please refer to City ordinances for regulations regarding amplified sound, tents, signs, or posters on public property.
- Do not stake anything into the ground without written approval from Whitefish Parks and Recreation Department.
- Refunds will not be given for inclement weather conditions.
- Reservations must be cancelled at least 48 hours in advance to receive a partial refund. A 20% administration fee will be charged for all refunds.
- It is the responsibility of the applicant to pay for all costs of damages that may occur during their function.
- I understand that if the Parks & Recreation staff is required to clean the facility after my event, the cost will be \$25.00 per staff hour minimum (for cleaning, in addition to necessary materials and supplies). If there is a cleanliness issue or noticeable damage, please report it to the Parks office @ 863-2470 immediately. Cleaning supplies, brooms and mops are located in the posted cleaning supply closet in each facility. Garbage is to be disposed of in the outside receptacles.
- Restrooms – Subject to seasonal closing.

### **\*Please note:**

If event attendance is 150 or more, this application must be submitted 60 days prior to requested date of use

**Beer/Wine Permit Information Form:**

**Will Beer / Wine be consumed: Yes / No**

**If yes, a Beer/Wine permit must be purchased from the City of Whitefish in the amount of \$20 per event and attached to this application.**

*Please read and initial:*

\_\_\_\_\_ **Applicant will ensure that all participants comply with all laws and ordinance regulating the consumption of the beer and or wine.**

\_\_\_\_\_ **No underage person will be allowed to consume beer and or wine.**

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

\_\_\_\_\_ **All beer and or wine containers will be properly disposed of.**

\_\_\_\_\_ **Applicant will protect the City of Whitefish from any liability resulting from the breach of this agreement for from the consumption of beer/wine on City property.**

\_\_\_\_\_ **Applicant acknowledges this permit may be revoked for failure to comply with its term.**

**Waiver of Liability**

**I herby 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, its 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 Name (please print): \_\_\_\_\_**

**Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_**

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

Facility Rate: \$ \_\_\_\_\_

Alcohol Permit: \$ \_\_\_\_\_

Total Amount Due \$ \_\_\_\_\_

FOP: CASH / CHECK / CREDIT CARD

Batch # \_\_\_\_\_

MC/Visa \_\_\_\_\_ Card # \_\_\_\_\_

Exp Date \_\_\_\_\_ 3 digit code \_\_\_\_\_

Check # \_\_\_\_\_

**Approved**

\_\_\_\_\_  
Parks and Recreation Director

\_\_\_\_\_  
Date

Comments: Parks

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Fire Department

\_\_\_\_\_  
Date

Comments: Fire

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Police Department

\_\_\_\_\_  
Date

Comments: Police

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Public Works

\_\_\_\_\_  
Date

Comments: Public Works

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