VILLAGE OF MUKWONAGO Park Facilities Rental Application

Date Submitted: _____

Event Date: _____

GUIDELINES

This form must be completely in its entirety and submitted to the Village of Mukwonago Clerk's Office, 440 River Crest Ct, Mukwonago, WI 53149, for approval. A Signed copy authorizing the use of the Park Facility will be returned to the requesting party. Fees and the park form must be on file **two (2) months** prior to the event. "Residents" include Village of Mukwonago residents.

 Mail completed applications to:
 Village Clerk-Treasurer's Office

 ATTN:
 Park Usage

 440 River Crest Ct
 Mukwonago WI

 53149
 Igourdoux@villageofmukwonago.com

FEES (check those that apply)

Field Pavilion A (Main) 1-49 people \$100.00 per day \$_____ \$_____ Pavilion A (Main) 50-100 people \$150.00 per day \$_____ Pavilion A (Main) more than 100 people \$175.00 per day Pavilion B (Ball Diamond) \$75.00 per day \$_____ \$ Pavilion C (Playground Pavilion) \$75.00 per day \$_____ Baseball Field (non-athletic organizations) \$25.00 per day \$_____ **Baseball Field Lights** \$40.00 per day \$_____ Entire Park \$300.00 per day \$_____ Electricity Coordination (Pavilions B and C) \$15.00 per day Additional \$25.00 per day \$_____ Non-Resident Fee

| DEPOSIT (all rentals, check those that app | oly) | | | | | |
|--|------------------|------------------------------------|----|--|--|--|
| Pavilion A and/or entire park Deposit | \$200.00 per day | \$ | | | | |
| Pavilions B and C Deposit | | \$100.00 per day | \$ | | | |
| Key Deposit | | \$25.00 | \$ | | | |
| RENTAL INFORMATION | | | | | | |
| Date(s) of Event: | | | | | | |
| Estimated Number of Participants: NOTE: (If there are 150 people or more, a Special Event Permit will be required under separate application) | | | | | | |
| Event Start Time: | Event End Time: | ent End Time: | | | | |
| APPLICANT INFORMATION | | | | | | |
| Name: | | | | | | |
| Address: | City: | State/Zip: _ | | | | |
| Daytime Phone: | | | | | | |
| E-mail: | | | | | | |
| ORGANIZATION INFORMATION (if applicable) | | | | | | |
| Name of Organization: | | | | | | |
| Mailing Address: | City: | State/Zip: _ | | | | |
| Phone Number: | Is organization | Is organization a 501(c)3? Yes:No: | | | | |
| Website Address: | | | | | | |

TERMINATION OF AN EVENT

The Village reserves the right to shut down an event that is in progress if it is deemed to be a public safety hazard by the Police Department, Fire Department, and/or there is a violation of Village Ordinances, State Statutes or the terms of the

applicant's permit. The Village Administrator and/or his/her designee may revoke an approved park facilities use permit if the applicant fails to comply in good faith with the provisions of the permit prior to the event date.

CERTIFICATION

By signing this form, the applicant certifies authorization to act on behalf of their organization, and hereby agrees to hold the Village, its officers, agents, employees, and contractors harmless against all claims, liability, loss, damage or expense (including but not limited to actual attorney fees) incurred by the Village for any damage or injury to person or property caused by or resulting directly or indirectly from the activities for which the permit is granted. Any change to coverage requires Village approval.

| Applicant Signature | 2 | Dat | e | |
|---------------------|------------|----------------------|--------------|--------------|
| | | | | |
| Print Name | | | | |
| | | Office Use Only | | |
| Fees Paid | Receipt # | Deposit Returned | Key # Issued | Key Returned |
| Department Approval | | | | |
| Administrator | Building 1 | Inspection | Fire | DPW |
| Police | Utilities | | | |