



Town of Malabar

APPLICATION FOR PARK RESERVATION

This application is intended to be used for the reservation of a designated area within any Malabar Park, Trailhead or Conservation area provided for the appropriate fee.

Today's Date:		Park Name:	
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Reservation Details & Requested Date & Times:			
Date & Time Start		Date & Time End:	
Alcohol Served:		Estimated Attendance:	
Applicant Name:		Applicant Contact Phone:	
Applicant Address:			
Applicant Email Address			
Group Name (if applicable)			
Reservation Date Contact Phone:			

Permit Categories: Please mark 1									
1: Sponsored		2: Sanctioned		3: Non-Profit *		4: Private		5: Free Speech	
*Please provide Tax Exempt # for Non-Profits									

The following activities require proof of insurance:

1. Physical Contact Sports
2. Alcoholic Beverage Usage
3. Sale of food items that has been permitted at functions open to the public
4. Gatherings that will have amplified music as its primary function

Liquor Liability Insurance Certificate of Coverage Attached:	Yes		No	
General Comp. Liability Insurance Certificate of Coverage Attached:	Yes		No	

Special Limitations or Conditions:	Initial Below
1. No vehicles on the grass anywhere within the park	
2. No Activity on the Soccer Field	
3. No fires outside the designated fire pits. (Permit required for any burn)	
4. NO ACTIVITIES REQUIRING THE USE OF WATER IS ALLOWED	

Please be advised that the restrooms will be setup for normal use. It is recommended that groups bring additional toilet paper and hand towels. All refuse not placed in trash cans will be removed from the park by the applicant.

I hereby accept responsibility for any and all damages and clean-up costs for the above referenced park facilities by the above-named individuals and/or group. By signing below, I attest that I have received Malabar Ordinance 00-06 and agree to the terms and conditions set forth.

Signature of responsible agent:	Town Manager Signature:
Print Name as signed:	Date: Approved Denied

FOR TOWN OFFICIAL USE ONLY			
Comments:		RETURNED	NOT RETURNED
Inspector Signature	Title	Date	