

**CITY OF METTER
CITY PARK APPLICATION**

Date: _____

APPLICANT INFORMATION:

Applicant Name: _____

Applicant Address : _____

Telephone #: _____

Email Address: _____

Name of Organization: _____

Name of Private Citizen/Chairman: _____

RENTAL INFORMATION

Date of Rental: _____

Time Requested for Use of Park: _____ am/pm until _____ am/pm

Expected Number of Persons in Attendance: _____

PARK(S) TO BE USED:

- | | |
|--|---|
| <input type="checkbox"/> William 'Billy' Trapnell Downtown West Park | <input type="checkbox"/> Lee St. Park |
| <input type="checkbox"/> Downtown Central Park | <input type="checkbox"/> Jaycee Park |
| <input type="checkbox"/> Downtown East Park | <input type="checkbox"/> Boston Park |
| | <input type="checkbox"/> East Lillian St. Pavilion Park |

I, _____, request permission to be allowed use of a City Park for the following reasons:

***If our organization is going to be selling food, other than baked goods, it is my understanding that I must provide a letter of approval from the Candler County Health Department prior to a permit being approved.**

***If our organization is going to be giving food away, it is my understanding that I do NOT need a letter of approval from the Candler County Health Department.**

Downtown West, Central and East Park

<u>Deposit</u>	<u>Rental Fee</u>	
\$50.00	\$100.00	Private Citizen's Use.
\$50.00	\$0	School, Civic Club, City, County or Non-profit Fund Raisers.

Lee Street Park, Jaycee Park, Boston Park and East Lillian Street Pavilion

<u>Deposit</u>	<u>Rental Fee</u>	
\$50.00	\$50.00	Private Citizen's Use.
\$50.00	\$0	School, Civic Club, City, County or Non-profit Fund Raisers.

*** \$50.00 Deposit to be refunded in accordance with Park Regulations.**

Paid: \$ _____ Date: _____

Poly Carts: \$ 15.00 per Poly Cart. Number of carts requested: _____

Paid: \$ _____ Date: _____

HOLD HARMLESS AGREEMENT

The undersigned releases the City of Metter and its employees, contract laborers, and agents from any and all liability and negligence with the exception of willful negligence.

I certify that I have received a copy of the City of Metter's Park Regulations and agree to abide by those rules.

Date: _____ Name: _____
(Print Name)

Authorized Signature

The City of Metter reserves the right to accept or reject an applicant based on the City of Metter's Park Regulations as adopted by city council on September 8, 2008.

Application approved By City of Metter Public Works Department:

_____ Date: _____

Deposit Refund Approved: Yes () No ()

_____ Date: _____