

CITY OF GLENDALE

CONDITIONAL PERMIT AGREEMENT FOR USE OF FACILITIES/PARKS

City of Glendale, 5909 N. Milwaukee River Parkway, Glendale, WI 53209 ♦ 414-228-1702

Name of Organization or Group <i>(if applicable)</i> :		
Applicant Name:		
Address:		
City:	State:	Zip:
Contact Number:	E-Mail Address:	
Please check which facility you would like to rent:	<input type="radio"/> Johnson Controls Community Amphitheater <input type="radio"/> David Hobbs Honda For the People Community Room <input type="radio"/> Sprecher Brewing Outdoor Oasis Beer Garden Patio	
Will you be purchasing items from the Sprecher Brewing Outdoor Oasis? <input type="radio"/> Yes <input type="radio"/> No		
Are you >= 21 years of age? <input type="radio"/> Yes <input type="radio"/> No	<i>You may only purchase beer with your rental if you are 21 and over. All patrons purchasing or drinking alcohol will be carded. No carry in alcohol is allowed.</i>	
Nature of Use:	Number of Attendees:	
Rental Date <i>(mm/dd/yy)</i> :	Day of the week <i>(circle)</i> : Su M T W Th F Sa	
Hours: _____ AM/PM to _____ AM/PM	Will amplified music (live band, DJ) be provided? <input type="radio"/> Yes <input type="radio"/> No <i>(Not allowed at Sprecher Brewing Outdoor Oasis Beer Garden Patio)</i>	
Number of Chairs/Tables Needed:		
<p>Requests for reservations are required to provide 30-day minimum notice to the City in order to assure adequate staffing levels. The City reserves the right to deny requests with less than 30-day notice due to inadequate staffing levels.</p> <p>Checks for all fees should be made payable to "City of Glendale." A deposit is included and is refundable following the proper utilization of the facility/park. Refunds are processed in approximately 4 weeks following a rental. Refunds will be made payable to the above-named applicant unless otherwise indicated. For more rental information, please see our website (glendalewi.org).</p> <p>I/We the undersigned certify that all information provided above is accurate to the best of my/our knowledge. I/We attest that I/we are age 21 or over and will assume all responsibility for the proper care and utilization of the above stated facility/park, including equipment. I/We further agree to abide by the Use of City Facilities Policy and Procedures and/or Shelter Rental Guidelines and Park Rules of the City of Glendale.</p>		
APPLICANT SIGNATURE: _____		DATE: _____

FOR OFFICE USE ONLY:

Certificate of Insurance? <input type="radio"/> Yes <input type="radio"/> No			
Rental Amount + Non-Resident Fee:	Deposit Amount:	Total Due:	Amount Paid w/ Application: \$ _____ / ____ / ____ Receipt Number:
Remaining Balance Due: \$ _____ / ____ / ____	Date Remaining Balance Paid: _____ / ____ / ____	Receipt Number:	
CITY APPROVAL: _____		DATE: _____	
Describe and itemize any charge(s) withheld from deposit:			
Amount of Deposit to be Refunded:	Authorized Signature:	Date: ____ / ____ / ____	