

CITY OF GLENDALE

CONDITIONAL PERMIT AGREEMENT FOR USE OF FACILITIES/PARKS

City of Glendale, 5909 N. Milwaukee River Parkway, Glendale, WI 53209 ♦ 414-228-1700

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	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.	
Nature of Use:	Number of Attendees:	
Rental Date <i>(mm/dd/yy)</i> :	Day of the week <i>(circle)</i> : S M T W Th F S	
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:		
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).		
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.		
APPLICANT SIGNATURE: _____ DATE: _____		

FOR OFFICE USE ONLY:

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