



819 Superior Ave.
Tomah, WI 54660
(608) 374-7445 or (608) 374-7420

APPLICATION FOR RENTAL OF RECREATION PARK FACILITIES AND HOLD HARMLESS AGREEMENT

We/I, the undersigned, do hereby make application to rent Recreation Park facilities under the terms and conditions set forth in this application.

We/I agree that any damage occurring to said property, over and beyond reasonable wear and tear, shall be paid for by the undersigned to the City of Tomah (City).

Cleaning of buildings will be assumed by the applicant. Cleaning of the grounds will be assumed by the applicant, unless under special provisions. The following conditions shall be met: 1) decorations removed; 2) floors swept; 3) garbage placed in dumpsters; 4) lights turned off; 5) thermostats turned down; and 6) doors locked. Any damage must be reported to the department. Cost of any repairs or failure to comply with the aforementioned conditions will be deducted from the security deposit. The security deposit or balance of same will be mailed to the applicant within ten (10) days following the inspection of the premises.

THE UNDERSIGNED ASSURES COMPETENT ADULT SUPERVISION OF THE EVENT, ASSUMES ALL RESPONSIBILITY FOR ANY LIABILITIES OCCURRING AT SAID EVENT, AND DOES HEREBY INDEMNIFY AND HOLD THE CITY AND ITS AGENTS HARMLESS FOR ANY AND ALL PERSONAL LIABILITIES, INCLUDING ANY DAMAGES TO PERSON OR PROPERTY. THE UNDERSIGNED MUST OBTAIN ALL NECESSARY PERMITS FOR SAID EVENT. A CERTIFICATE OF INSURANCE IS REQUIRED, UPON REQUEST, BY THE CITY.

DATE OF EVENT SET-UP DAY

TYPE OF EVENT

(Please indicate which facility or facilities you wish to rent.)

- RECREATION BUILDING (MAIN HALL)
RECREATION BUILDING (NORTH HALL)
RECREATION BUILDING (BOTH HALLS)
EXHIBIT BUILDING
FARM PROGRESS BUILDING
PROGRESS PULL BUILDING
MULTI-PURPOSE
GRANDSTAND
GROUND

NAME OF ORGANIZATION

NAME OF APPLICANT

ADDRESS TELEPHONE NUMBER

NAME, ADDRESS AND PHONE NUMBER OF ALTERNATE CONTACT PERSON:

ALL APPLICATIONS MUST BE APPROVED BY THE PARKS AND RECREATION COMMISSION. APPLICATIONS SHOULD BE ON FILE AT LEAST SIXTY (60) DAYS BEFORE THE EVENT. THE SECURITY DEPOSIT, RENT AND LICENSE FEES ARE DUE AND PAYABLE SIXTY (60) DAYS PRIOR TO THE EVENT. IF AN EVENT IS CANCELLED LESS THAN THIRTY (30) DAYS PRIOR TO THE DATE OF THE EVENT AS STATED ON THE APPLICATION, THE SECURITY DEPOSIT WILL BE FORFEITED BY THE APPLICANT.

SIGNED DATE

(OFFICE USE ONLY)

AMOUNT PAID REMAINING BALANCE RECEIPT NUMBER DATE

AMOUNT PAID REMAINING BALANCE RECEIPT NUMBER DATE

AMOUNT PAID REMAINING BALANCE RECEIPT NUMBER DATE

AMOUNT PAID REMAINING BALANCE RECEIPT NUMBER DATE

SECURITY DEPOSIT RETURNED TO DATE

SPECIAL PROVISIONS