

TOWN OF OTTAWA FACILITY USE AGREEMENT

This form must be completed in its entirety and submitted to the Town of Ottawa, W360 S3337 Hwy. 67, Dousman, WI 53118. A signed copy authorizing the use of the requested facility will be returned to the requesting party **prior** to the use of such facility.

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1. NAME OF ORGANIZATION REQUESTING FACILITY: _____

2. EVENT OR PURPOSE: _____

3. SPECIFIC DATE(S) REQUESTED: _____

4. TIME OF DAY REQUESTED: From: _____ To: _____

5. ESTIMATED ATTENDANCE: _____

6. CHECK THE LOCATION DESIRED:

_____ North Diamond

_____ Volleyball Courts

_____ East Diamond

_____ Picnic Area/Shelter (reserve through clerk's office)

_____ West Diamond

_____ Pavilion (reserve through clerk's office)

7. DATE OF APPLICATION: _____

8. PRINT NAME, ADDRESS AND PHONE NUMBER OF APPLICANT:

Name _____

Address _____

City, State, Zip _____ Phone Number _____

SIGNATURE OF *RESPONSIBLE PARTY: _____

(*See reverse side)

9. RENTAL FEE (If required): _____

10. AUTHORIZATION STATEMENT: You are authorized to use the facilities requested subject to the limitations defined on the reverse side of this agreement established by the Town Board, and special limitations as noted herein.

A. Minimum limits of liability insurance: _____

B. _____

11. AREA ASSIGNED: _____

12. AUTHORIZED BY: _____ DATE: _____