

CITY OF HAGERMAN COLTHARP PARK USE

191 State Street North, P.O. Box 158, Hagerman, Idaho 83332

Phone 208-837-6636 Fax 208-837-9058

APPLICATION DATE: _____

NAME OR ORGANIZATION: _____

EVENT: _____

ADDRESS: _____

CONTACT PERSON: _____

PHONE: _____

DATES NEEDED: _____

TIME NEEDED: _____

PEOPLE(Approx): _____

WHAT AREA NEEDED: _____

Activities or Equipment (bounce house, water slides, etc.) _____

Medium Group Event: (50-100 people)

Note: Each event can last no longer than 72 hours. If the park is needed for a longer period, a new reservation form will need to be filled out for each 72 hour period.

CHARGES:

1. Deposit: \$250.00 per event (Refundable if no damages present. Damage costs beyond the security deposit will be billed)

2. Fees: (Non-refundable) per day. No fees will be waived.

Full Day (6+ hours) \$75.00 per day/ ttl days _____

Half Day (2-5 hours) \$40.00 per day/ ttl days _____

Utilities \$ 5.00 per day/ ttl days _____

Park Rental Fee Total: _____

Rules and regulations for use of the park:

1. Keys to the Park remain with the City Superintendent. No keys are to be duplicated.
2. 5 days notice must be given to the City Superintendent if a vehicle is to be driven onto the grass and parked for any length of time.
3. Generators can be used 7 a.m. to 10 p.m. only.
4. You are responsible for the garbage. Make arrangements for a dumpster of adequate size if needed.
5. Pets on leash only, and cleaned up after.
6. No stakes or posts without City Superintendent approval.

- 7. Park users assume liability for accidents or injuries (Id. Code 3-104)
- 8. Fires are allowed only in the BBQ and grills provided.
- 9. Glass bottles are not allowed in the park.
- 10. Keep all gates and entrances clear and accessible.
- 11. You are responsible for damage in the park during the event. Walk throughs will be conducted before and after the event during normal business hours with the City Superintendent.
- 12. Do not interfere with irrigation pipes or sprinklers.
- 13. Profanity is not to be used over an amplified system.

SIGNATURE _____ DATE _____

All events must be approved by the City Council.

Approved _____ Date _____

Not Approved _____ Date _____

Office Use Only

1. Deposit Fee: Check No. _____ Clerk Initials _____

Returned Signature: _____

Additional Damage Charges: _____

2. Rental Fee: Check No. _____ Clerk Initials _____