

Village of Clinton

301 Cross Street PO Box 129
Clinton WI 53525

www.clintonwi.us

Phone: (608) 676-5304

Fax: (608) 676-5984

Park Shelter Reservation Application

Date: _____

Start Time: _____

End Time: _____

Circle Shelter Requested:

Herb Reffue Park

Gert Wolter Park

Please Print Clearly

Person In Charge: _____

Group (if applicable): _____

Street Address: _____

City, State, Zip: _____

Phone: _____

Serving Fermented Malt Beverages? Yes (Include Additional \$50.00 fee and deposit) **Glass beverage containers not permitted.**
 No

<i>Fee Description</i>	<i>Resident -Lives in the Village of Clinton</i>	<i>Non-Resident</i>
<i>Shelter Rental</i>	<i>\$25.00</i>	<i>\$50.00</i>
<i>Kitchen Rental (Gert Wolter Park)</i>	<i>\$15.00</i>	<i>\$15.00</i>
<i>Kitchen Deposit (Gert Wolter Park)</i>	<i>\$50.00</i>	<i>\$50.00</i>
<i>Fermented Malt Beverages (fee)</i>	<i>\$25.00</i>	<i>\$25.00</i>
<i>Fermented Malt Beverages (deposit)</i>	<i>\$25.00</i>	<i>\$25.00</i>
Total Due	\$	\$
Date Paid		

IMPORTANT: I understand that the issuance of this Park Shelter Reservation is subject to the accuracy of the information supplied on this form, and the adherence to all Village of Clinton ordinances, policies, and regulations of the Parks & Recreation Department and that the Village of Clinton retains the right to revoke this permit any time prior to or during this event. I also understand the conditions of this rental application and agree to pay for any damage arising from use of this Village facility. It is further understood and agreed that each group or individual is responsible for cleaning the shelter and surrounding area. Renter will be responsible for cleanup costs over the amount of the rental fee in the event user fails to clean up properly. If there are 100 or more people in attendance at this event, I agree to provide and pay for the delivery and hauling away of a dumpster for refuse OR I agree to haul away the refuse myself. **Cancellations must be made at least a week prior to the reservation date in order to get a refund. Village will retain a \$10.00 processing fee, with the balance being refunded.** My signature constitutes my agreement with these stipulations.

Signature: _____

Date: _____

Clerk /Deputy Clerk: _____

Date: _____

Deposits & refunds are returned within thirty (30) days following event or cancellation.