

Date of Use: _____ Day of Week: _____ Arrive At: _____^{a.m.} Depart At: _____^{a.m.}
_{p.m.}

Person Requesting Permit: _____ For Group: _____

Address: _____ City/State: _____ Zip: _____

Cell Phone: _____ Alternate Phone: _____ E-Mail: _____

Projected Attendance: _____ Age Range Of Group: _____

FACILITY : _____

SPECIFIC LOCATION WITHIN PARK: _____

TYPE OF ACTIVITY PLANNED: _____

DETAILED DESCRIPTION OF ACTIVITY PLANNED:

WHAT YOU ARE REQUESTING FROM MCPD:

User Fees

Activity/Event Fee: \$100 with \$50 discount for Miami County Residents. The Miami County Park District reserves the right to waive fees for individuals or organizations when it is determined appropriate.

____ In County Fee \$50 ____ Out of County Fee \$100

Additional fees will be based on the staffing and equipment requirements for the requested activity/event.

- Ranger \$65/hour x _____ hours = \$ _____
- Staff \$25/hour x _____ hours = \$ _____

Payment of fee will be due upon application approval.

In using the Miami County Park District facilities/parks, _____ agrees to hold harmless and indemnify Miami County Park District, it's appointed officials, officers, employees and volunteers from any claims that may arise out of the use of the provided space/facility except for claims which may arise as a result of the negligence of Miami County Park District or an existing defect.

Signature of person requesting permit: _____ Date: _____

 Fee and proof of insurance (Certificate of Liability) if applicable must be returned by _____ to secure your event. All fees are non-refundable.