

**City of Dodgeville**  
**Ley Memorial Pavilion/Harris Park**  
**600 Bennett Road, Dodgeville, WI 53533**  
**Application for Use And Date of Reservation**

Individual Application

**User Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**FUNCTION DESCRIPTION**

**Type of Event:** \_\_\_\_\_

Period of Usage:	<u>Date</u>	<u>Start Time</u>	<u>To</u>	<u>End Time</u>
	_____	_____	_____	_____
	_____	_____		_____

**Estimated Attendance:** \_\_\_\_\_ Park closes at 11 PM unless an extension is granted.

**Time Limit Extension** (Please fill out if requesting an extension of hours.)

\_\_\_\_\_ am requesting an extension to the park hours from 7:00 AM to \_\_\_\_\_ for the following listed  
(Individual) (Time)  
 event \_\_\_\_\_ being held at the Ley Memorial Pavilion on \_\_\_\_\_  
(List Event) (Date of Event)

The reason for my extension request is \_\_\_\_\_

\_\_\_\_\_  
 Requestor Signature Date

**Office Use Only:** Approved Meeting Date of Action

<b>FEE SCHEDULE</b>			
Users	Deposit	Daily Rental Fee	Rental Hours
Family Event (Resident)	\$100.00	\$250.00	(Rental Hours: 7 a.m. - 11 p.m.)
Family Event (Non-Resident)	\$100.00	\$350.00	(Rental Hours: 7 a.m. - 11 p.m.)
Wedding/Resident	\$100.00	\$400.00	(Friday 3 p.m. - Sunday 5 p.m.)
Wedding/Non-Resident	\$100.00	\$700.00	(Friday 3 p.m. - Sunday 5 p.m.)
Stage Rental	\$0.00	\$50.00	(For duration of event.)

	Daily Rental	# Days	Total Use Fee
120' x 225; Arena Area & Kitchen	\$ _____	_____	\$ _____
Stage Rental	\$50.00		\$ _____
Deposit Clean-Up/Damage (Returned if no damage & properly cleaned up.)			\$100.00
<b>GRAND TOTAL DUE</b>			\$ _____



**PLEASE USE THE WORDING "LEY MEMORIAL PAVILION, HARRIS PARK"  
 IN YOUR ADVERTISING FOR EVENTS!**

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**Special Needs**

To Be Secured By User and Reason & Source of Supply

- Liquor License:  \_\_\_\_\_
- Picnic Tables:  \_\_\_\_\_
- Ambulance Standby:  \_\_\_\_\_
- Fire Dept. Service:  \_\_\_\_\_

**OTHER CONDITIONS OF USAGE**

**STATEMENT OF UNDERSTANDING FOR THE DEPOSIT**

STATEMENT OF UNDERSTANDING: It is understood and agreed by the applicant that the applicant is solely responsible for all clean-up, refuse collection and damage repair and that the deposit being made may not be sufficient to meet these costs and upon notification of any excess amount due to meet such costs applicant will promptly pay the same. It is further understood that be renting these facilities to the applicant for the event to be conducted, the City of Dodgeville and the Parks & Recreation Committee are not a sponsor, supervisor, manager, director or in any way responsible for such an event, for any loss or damage arising out of the conduct of such event, and that such event and any such loss or damage are solely the responsibility of the applicant.

DATE \_\_\_\_\_ BY \_\_\_\_\_  
Person in charge of this activity

\_\_\_\_\_  
City of Dodgeville Representative

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**PARK USE RELEASE AND INDEMNIFICATION AGREEMENT**

In consideration of permission granted to the undersigned by the City of Dodgeville to use the facilities at Harris Park for the

\_\_\_\_\_ on \_\_\_\_\_

from the hours of \_\_\_\_\_ to \_\_\_\_\_,

the undersigned, for (himself/herself/itself) and (his/her/its) agents, servants, officers and employees represents that (he/she/it) has inspected said facilities and agrees to assume the risk of loss or damage arising out of the undersigned's use thereof; and hereby releases and discharges the City of Dodgeville, its agents, servants, officers and employees guests and invitees; and, upon the request of the City of Dodgeville, the undersigned's use of said Park facilities.

**INDEMNIFICATION**

The undersigned further agrees to indemnify and hold the City of Dodgeville harmless from any and all claims, damage, loss, costs, including attorney fees, and causes of action, which may be brought against or sustained by the City of Dodgeville resulting from or arising out of the use of said facilities by the undersigned, its agents, servants, officers, employees, guests and invitees; and, upon the request of the City of Dodgeville, the undersigned will furnish a certificate of insurance certifying that the City of Dodgeville is insured against such risks and exposure under a policy of liability insurance issued by a liability insurance company authorized to do business in the State of Wisconsin with coverage limits of not less than: \$1,000,000.

\_\_\_\_\_/\_\_\_\_\_  
(Representative) Corporation or Organization

BY: \_\_\_\_\_

For Office Use Only:		
Deposit : Check # _____	Cash Credit Card _____	Proof of Insurance Provided: _____
Rental Fee: Check # _____	Cash Credit Card _____	Verify all Signatures: _____
Stage Fee: Check # _____	Cash Credit Card _____	Verify Special Requests: _____