

**City of Brownsville
P.O. Box 138
Brownsville, MN 55919
(507) 482-6732
City Park Usage and Application Fees**

Contact Person: _____

Mailing Address: _____ City: _____ Zip Code: _____

Phone Number: _____ Sponsoring Agent: _____

Type of Event: _____ Day/Date of Event: _____ Year: _____

Facility Requested: BallPark Shelter & Concession

Fees: Security Deposit: \$25.00 Rental Fee: \$75.00

Set-up Time: _____ Departure Time: _____

Alcoholic Beverages to be Served: ___ Yes ___ No Need for Permit: ___ Yes ___ No

Copy of Homeowners Insurance Policy/Certificate of Insurance: _____ Yes _____ No

Upon application approval, the City of Brownsville shall make available to the holder of this permit the specified facility area for the use on the date specified, and shall provide regular lawn mowing and a representative to open and close facilities. The city shall not be responsible for providing food, bar service, supplies, or supervision of the activities conducted by the holder. The City reserves the right to exercise supervisory authority and to prevent unauthorized or illegal activities on City property. The City shall not be responsible for interruptions of the use of the described facilities for reasons beyond its control, and reserves the right to cancel this application approval for reasons of public safety or convenience.

I (We) represent and agree that I (We) have read and understand the information regarding the use of the said facility. I (We) further understand that this is only an application for use, which provides me (us) with no assumed or implied rights for use until written approval is received. I (We) further understand that a deposit fee paid by me (us) is refundable only after event and all clean-up is complete and that by canceling reservations I (We) will be assessed the \$25.00 deposit fee.

Specifically, and without limiting the generality of the foregoing, the holder of this permit agrees to save, defend, and hold harmless the City of Brownsville for any damages to City personnel, facilities, equipment or other City Property and/or persons of the third party, resulting from the use of authorized hereby. The City shall not be liable for damage to the property or any person participating in the activities authorized hereby, nor shall it be liable for the death or injury of any such person occurring as a result of the use of the facilities authorized hereby.

Signature of Applicant: _____ Date: _____

Make Checks Payable to the City of Brownsville

Office Use Only

Date Received: _____

Application Received by: _____

Damage Deposit Required: _____

Damage Deposit Returned: _____

Fees: _____

Deposit Fee: _____ Date: _____

Balance Due: _____ Date: _____