

**BROWN-ELLISON RECREATIONAL PARK
RESERVATION APPLICATION**

APPLICANT: _____

ADDRESS: _____

TEL. NO: _____ E-Mail Address: _____

Tax ID number _____

RESPONSIBLE GROUP MEMBER: _____

DOES THIS PERSON HOLD A POSITION OF LEADERSHIP IN THE GROUP: _____

DATE REQUESTED: _____ ARRIVAL: _____ DEPARTURE: _____

TYPE OF FUNCTION: _____

MAXIMUM NUMBER OF PEOPLE: _____

AREA
REQUESTED: _____

WILL ALCOHOLIC BEVERAGES BE ON THE PREMISES: _____

SIGNATURE BY THE RESPONSIBLE GROUP MEMBER ACKNOWLEDGES RECEIPT OF A COPY OF THE GROUP RESERVATION RULES WHICH PROVIDE A PENALTY FOR FAILURE TO COMPLY. BY ACCEPTANCE AND USE OF A PERMIT, THE ABOVE APPLICANT AND RESPONSIBLE MEMBER AGREE TO COMPLY FULLY WITH THE RULES AND REGULATIONS FOR USE OF THE AREA AND TO BE RESPONSIBLE FOR AND INDEMNIFY AND HOLD HARMLESS THE TOWN OF GRANBY OR ANY OF ITS EMPLOYEES FOR ANY INJURY OR DAMAGE EITHER CAUSED BY THE APPLICANT, ITS MEMBERS OR GUESTS OR RESULTING FROM VIOLATION OF SAID RULES AND REGULATIONS.

RESPONSIBLE GROUP MEMBER

Deposit received: _____

Date received: _____