



**VILLAGE OF HARRISON HOT SPRINGS
SPECIAL EVENT PARK / FACILITY USE PERMIT
APPLICATION**

Name of Applicant: _____

On behalf of: _____

Address of Applicant: _____

Phone Number: _____ E-mail: _____

Fax Number: _____

Event: _____ Date of Event: _____

- Wedding Family Reunion Memorial Hall
 Race / Competition Festival Other _____

***Note – please provide map of race route / layout of event on beach front, include any necessary road closures and plan for event.**

Estimated number of participants: _____

Location of event: _____

Additional Information: _____

In consideration of the issuance of this Permit, the Applicant agrees to the terms and conditions set out on the following rules and regulations.

_____ Date: _____

Applicant's Signature

FOR OFFICE USE ONLY	
_____ CAO, Village of Harrison Hot Springs	Date: _____ Other Licenses required: _____