



Columbia Township Park Pavilion Use Reservation Form

Group/Individual: _____

Name of Responsible Person/Renter: _____

Mailing Address: _____ City _____ MI, Zip _____

Phone Number: _____

Activity Date(s) and Times: _____

Purpose of Reservation: _____

Township Resident: YES _____ NO _____

Facility Use Policies

The use or possession of alcoholic beverages or illegal substances is strictly prohibited.

The Township reserves the right to ask the applicant and guests to vacate the property if the Township representative determines significant damage to persons or property is imminent or if the spirit of the rental policy is in jeopardy.

The renter agrees to leave the facility and associated equipment in the same conditions as when they arrive. The facility must be left clean with all trash/garbage placed in the appropriate containers. All tables must be returned to their original position.

The applicant assumes responsibility for all damage to the facility and equipment beyond normal "wear and tear." The applicant also is responsible for all costs associated with legal action and injury that may arise from their use of the facility. Repair of damage may be levied against the applicant.

Please note: There is a \$100.00 security deposit due when renting the pavilion. The security deposit will be returned to the renter, after inspection of the pavilion has been performed by a representative from the Township.



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Indemnification Agreement:

_____ agrees to defend, indemnify and hold harmless Columbia Township from any claim, demand, suit, loss, cost of experience, or any damage which may be asserted, claimed or recovered against or from Columbia Township by reason of any damage to property, personal injury or bodily injury, including death, sustained by an person whomsoever and which damage, injury, or death, arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss, cost of expense if caused in whole or in part by the negligence of the applicant, _____, or by third parties, or by the agents, servants, employees or factors of any of them.

TO BE COMPLETED BY COLUMBIA TOWNSHIP OFFICE

SCHEDULE CHECKED FOR CONFLICTS: YES ___ NO ___

REQUEST GRANTED: YES ___ NO ___

APPROVED BY: _____

RESERVATION NUMBER: _____

DATE: _____