

Village of Middleville

CALVIN HILL PARK & SHELTER RESERVATION POLICY

Reservations for the Calvin Hill Park & the shelter must be made with the Village Office. A reservation is not confirmed until a reservation form is on file and the security deposit fee is paid to the Village of Middleville. Each reservation shall be subject to the following conditions and rules:

Posted park rules and the enclosed information must be adhered to. Use of restrooms is included. Each reservation form shall be accompanied by a check or payment for the security deposit. Reservation of the park and shelter does not entitle the group to close access to the park to other members of the public.

Park Hours

From dawn till dusk.

Security Deposit Fee

Each reservation shall be accompanied by a security deposit of \$100. If the facility is left in good, clean order, the deposit will be refunded.

Electricity is not available in the Calvin Hill Park shelter.

Restrooms

A portable restroom is available in Calvin Hill except during the winter months

Parking

The parking spaces in the parking area on Park Street are available.

Cancellation of Reservation

A reservation may be cancelled no less than 8 days before the date of the reservation, allowing for any other reservation to be accepted.

Alcohol

The possession and consumption of alcoholic liquor in Village parks and on Village property is prohibited pursuant to the Village's Code of Ordinances unless application for a permit is submitted to the Village and approved in accordance with the Village's Code of Ordinances and regulations promulgated thereunder (the "Code"). If a permit is approved, alcohol may be possessed and consumed in accordance with the terms and conditions of the permit, the Village Code and State law. Alcoholic liquor may not be sold in conjunction with the rental of a Village park facility without approval of the Michigan Liquor Control Commission.

Village of Middleville
CALVIN HILL PARK & SHELTER RESERVATION FORM

For your information all facility rental fees are placed in the Recreation Fund to help maintain, renovate and improve Village of Middleville park facilities. Thank you for your patronage.

PLEASE COMPLETE THE FOLLOWING INFORMATION IN LEGIBLE FORM:

1. Name of Person Making Reservation: _____
2. Name of Group for Which Reservation is Made: _____

3. Complete Mailing Address for Person or Group: _____

4. Date(s) of Reservation: _____
5. Set-up/Arrival: No earlier than _____ AM/PM
Event Start: _____ AM/PM Departure: _____ AM/PM
6. Daytime Telephone Number: _____
Evening Telephone Number: _____
7. Purpose of the Reservation: _____

8. Number of People Anticipated: _____
9. Are you requesting a permit to possess and/or consume alcohol? Yes No
(If Yes, please complete the information requested in Item 11 below and sign the required certifications as part of the rental of the pavilion; if No, sign on page 4.)
10. Age of the applicant: _____
11. - Alcohol Permit and Insurance Requirements:
 - a. You are required to purchase liability insurance that meets the Village's insurance requirements;
 - b. You may only serve alcohol during the hours defined in your park reservation application;
 - c. Premises Liability insurance with a limit of at least \$1,000,000 including "Host Liquor Liability" coverage. (Applies to alcoholic beverages served at no charge.)
 - d. "Host Liquor Liability" **must include the Village of Middleville as an additional insured for primary and non-contributory limits of liability.**
- Insurance Information:
 - e. Carrier: _____

- f. Agent contact name, phone and e-mail: _____

- g. Policy number: _____

Attach certificate of insurance to application.

- Time Period in which alcohol will be served (serving of alcohol must end 1/2 hour prior to the established ending time of your event.):
No earlier than _____ AM/PM No later than _____ AM/PM

- Certifications/Hold Harmless

h. I confirm that I/we will not sell/provide alcoholic beverages and that there will be no alcoholic beverages served to any individuals under the age of 21 at our event. I confirm that I/we will leave the area in a clean and presentable condition.

i. In consideration of being allowed by the Village of Middleville to possess and consume beer and/or wine at the above location and date(s), the undersigned, by this application, does/do hereby expressly stipulate and agree to release, waive, discharge, indemnify and forever hold harmless the Village of Middleville, its departments, officials, officers, its assigns, agents, servants and employees and volunteers of and from all claims, demands, actions or causes of action now existing or which may hereafter exist by reason of any damage, loss, injury or death which heretofore has been or which may hereafter be sustained by the said INDIVIDUAL, GROUP, ORGANIZATION OR FAMILY in consequence of their participation in any and all activities in connection with issuance of this permit.

This release extends and applies to, and also covers and includes, all unknown, unforeseen, unanticipated and unsuspected injuries, death, damages, loss and liability and the consequence thereof, as well as those now disclosed and known to exist. The provisions of any state, federal, local and territorial law or statute providing in substance that releases shall not extend to claims, demands, injuries, death or damages which are unknown or unsuspected to exist at the time to the person executing such release, are hereby expressly waived.

Signature of Person Applying for Alcohol Permit
(Must be same as person requesting reservation)

Date

Questions may be directed to the Village Office at 269-795-3385 during regular business hours (Monday through Friday 9-5). For after-hours assistance with the facility during the event, please call 269-948-4800, Extension 1.

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CALVIN HILL PARK AND SHELTER RESERVATION

Acknowledgement and Agreement

By signing below, I acknowledge that I have read and understand the various rules and provisions on this form. I will accept responsibility for ensuring full compliance with these rules during the reservation time. I further understand and agree that I shall be responsible for the proper use and care of the facility being placed in my care.

Signature of Person Requesting Reservation

Date

Office Use Only

Date Received: _____

Residency Verified: _____

Non-Profit Status Verified: _____

Alcohol Permit Requested: Yes No

Alcohol Permit Received: Yes No

Certificate of Insurance Received: Yes No

Insurance Verified with Agent: ____ Yes ____ No Date of Verification: _____

Park Fee: ____ Cash, or ____ Check #: _____

Security Deposit: ____ Cash*, or ____ Check #: _____

Staff initials after action taken _____

Permission to destroy the check after the event,

Mail to _____

* Cash must be picked up by applicant after the event

Approved? Yes No

Reason(s) for denying: _____

Signature: _____

PLEASE DISTRIBUTE FORMS AS FOLLOWS:

COPY OF APPROVED PERMIT (PAGES 1-4) TO CUSTOMER

COPY OF PAGE 2 TO DPW

ORIGINAL COMPLETED PAGES 2-4 FOR OFFICE