



Minnesota Department of Public Safety
 Alcohol and Gambling Enforcement Division
 445 Minnesota Street, Suite 222, St. Paul, MN 55101
 651-201-7500 Fax 651-297-5259 TTY 651-282-6555
**APPLICATION AND PERMIT FOR A 1 DAY
 TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE**

Name of organization Itasca Curling Association Inc		Date organized 5-1968	Tax exempt number 84-3390890
Address PO Box 863, 902 Hale Lake Pointe Rd		City Grand Rapids	State Minnesota
		Zip Code 55721	
Name of person making application Ramona Sjostrand		Business phone 218-256-2030	Home phone 218-2526-2030
Date(s) of event October 29,30 & 31, 2021	Type of organization <input type="checkbox"/> Club <input type="checkbox"/> Charitable <input type="checkbox"/> Religious <input checked="" type="checkbox"/> Other non-profit		
Organization officer's name Amber Heinle	City Grand Rapids	State Minnesota	Zip Code 55744
Organization officer's name Chris Carlson	City Grand Rapids	State Minnesota	Zip Code 55744
Organization officer's name Julie Gothard	City Grand Rapids	State Minnesota	Zip Code 55744
Organization officer's name Ramona Sjostrand	City Cohasset	State Minnesota	Zip Code 55721

Location where permit will be used. If an outdoor area, describe.

902 Hale Lake Pointe Rd

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City or County approving the license	Date Approved
Fee Amount	Permit Date
Date Fee Paid	City or County E-mail Address
	City or County Phone Number

Signature City Clerk or County Official

Approved Director Alcohol and Gambling Enforcement

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event.

**ONE SUBMISSION PER EMAIL, APPLICATION ONLY.
 PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY PERMIT APPROVALS WILL BE SENT
 BACK VIA EMAIL. E-MAIL THE APPLICATION SIGNED BY CITY/COUNTY TO AGE.TEMPORARYAPPLICATION@STATE.MN.US**