

Darboy Community Park - Shelter Rental Application

N9334 Noe Rd • Harrison • WI 54915

Name: Jody Rasmussen Phone: 920 227 8014
 Address: 65915 Moonflower Dr
 Rental Date: 6-11-26 Rental Hours: 5-9
 Type of Event: Scout Court of Honor / Eagle Court of Honor Organization (if any): Troop 135

Do you intend to have any of the following:

"Yes" to any of these may require Village Board approval. Please allow 30 days for review.

- | | | |
|---------------------|--|--|
| 1. Bounce House | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Certificate of Insurance is required |
| 2. Alcohol Served | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Special Event Permit is required |
| 3. Concession Sales | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Special Event Permit is required |
| 4. Amplified Sound | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Special Event Permit is required |
| 5. Tents | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Special Event Permit is required |
| 6. Mechanical Rides | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Special Event Permit is required |
| 7. Admission Fee | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Special Event Permit is required |
| 8. Public event | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Special Event Permit is required |
| 9. Street Closure | No <input checked="" type="checkbox"/> Yes ___ | If yes, a Special Event Permit is required |

- The renter is responsible for damage caused to the facility's furniture, equipment, and structure during the event.
- The renter is responsible for cleaning the kitchenette. See instructions on the refrigerator.
- **Key Pick Up/Security Deposit Dropoff:** Mon-Fri 8:00 am to 3:00 pm the week **before** your event
- The security deposit will be returned/shredded after the key is returned. The key must be returned within 2 business days **after** the event. A \$25.00 fee will be applied for lost or unreturned cards.

I agree to indemnify and save harmless the Village of Harrison, their employees and elected/appointed officials, and their agents from any liability from claims of bodily damage or any other nature whatsoever arising out of the use of the Community Park. I have received a copy of the facility use **Policies and Guidelines** attached to this contract and agree to abide by all the rules and regulations formulated for the use of the building and facilities located in the Village of Harrison.

Applicant Signature: Jody Rasmussen Date: 5-18-26
 (Applicants must be 18 years or older)

The Park Pavilion is not reserved until the completed form and rental fee are received

Office Use:	Key:	Staff Int:
\$150 Security Deposit: Ck# _____	Date Issued: _____	_____
\$75/\$150 Rental Fee: Ck# _____	Date Returned: _____	_____
Staff Signature _____	Date _____	_____