

## Application for Use of City of Virginia Park Facility

	Name:		
	If Applicable: Organization:		
	Address:		
	City:	State:	Zip:
	Telephone:	(primary)	(alternate)
	Event Name or Description:		
	Date of Event:		
	Time of Event, including set up and clean up:	□a.m.□p.m.	to□a.m.□p.m. /□ all day
	Will intoxicating beverages be served and/or sold:   Yes   Intoxicating beverages are available, additional permissions are required. Please contact the City Clerks Office at (218) 748-7500 for more information		
	If Applicable: Proof of Liquor License or Permit:		
	If Applicable: Certified Law Enforcement Officer:		
	,		
	If Alcohol to be Sold: Minimum of \$1,000,000 with the	•	
	If Alcohol to be Served: Proof of homeowner's insura  Estimated Attendance:	· ·	iy events
	Building Requested: Soroptomist Build		merican Building
	Lions ClubBand Pavilion		
_	ACKNOWLI rees that they have received and read Park & Recreations in said document.		that user agrees to all terms and
User		Da	ate
Approved By		Da	ate
Deposit Amo	ount: Paid by CHECK CASH	DECEMEN DA	·
Rental Fee A			ATE: