## Return at least 10 working days prior to first date requested.

## CITY OF CHANHASSEN FACILITY USE APPLICATION

Rental fees and down payment, if applicable, will be set when application is processed. Cancellations must be made 24 hours in advance of the scheduled use.

Name of Organization:			
Contact Person:	Phone (H)	):	(W):
Address:	City:	_	Zip:
Activity Supervisor:	Phone (H):	(W):	E-Mail:
Activity Facility Will Be Used	For:		
Facility Requested:	Area R	Requested:	
Date(s) Requested:	Times: Start _		End
	Times: Start_		End
	Times: Start_		End
	Times: Start_		End
Special Needs or Requests:			
including attorneys fees, which myself, my heirs, executor, and damages which may have or wl group's participation at Chanha		may be held liable d forever discharge p, arising out of or	e, and do thereby for e any and all claims for connected with a
Signature of Authorized Repres	sentative	Date of Request	
•	Chanhassen Park and Recreationy questions, call Chanhassen Park		
OFFICE USE ONLY Date Received: Comments:	Approved by:	Date Returned	d: