

**BEDFORD TOWNSHIP PARK COMMISSION
SHELTER HOUSE PERMIT**

8100 JACKMAN RD.

847-6791

TEMPERANCE, MI 48182

PARK & SHELTER REGULATIONS

1. **PARKS OPEN FROM SUNRISE TO SUNSET.**
2. **INTOXICATING BEVERAGES ARE PROHIBITED.**
3. **PREMISES MUST BE LEFT IN THE SAME CONDITION AS WHEN RESERVED.**
4. The authorized representative who signs the permit, also referred to as the Permit Holder, must be 21 years of age and **shall accept full responsibility for the orderly conduct of the persons who attend the function, and for any damage to park property.**
5. Gambling, Admittance Fees, and Commercial Demonstrations are not permitted.
6. Motorized vehicles are prohibited from play areas. Park only in designated parking areas.
7. All Park equipment shall not be moved, altered, or defaced.
8. The Bedford Township Park Commission reserves the right to request police supervision at any function with the cost to be incurred by the permit holder in advance.
9. These rules pertain to Township Parks and there shall be no deviation from them.
10. Driver's license or picture I.D. is required of the Permit Holder.
11. **A fee of \$20.00 is required to reserve the shelter, and must be paid when permit is issued.**

A. **RESERVATION**

The _____ Park Shelter House is reserved on _____ by _____ for _____ where approximately _____ persons will attend.

B. **INDEMNITY CLAUSE**

The Permit Holder will indemnify the Bedford Township Park Commission and hold it harmless from and against any and all claims, actions, damage, liability and expense in connection with loss of life, personal injury and/or damage to property arising from or out of the occupancy or use by the Permit Holder or any part of the property, occasional wholly or in part by any act or omission of the Permit Holder, its agents, contractors or employees.

C. **TERMS OF AGREEMENT**

As an authorized representative of the above-mentioned event on _____, **I the undersigned agree to make known to persons who will attend the event, that they shall abide by the regulations printed above. I understand that ALL INTOXICATING BEVERAGES ARE PROHIBITED, and that the Shelter House must be cleaned upon leaving the premise.**

(Date)

(Signature)

(Address)

(Phone No.)

Amt to be Paid _____ **Receipt No.** _____ **Cash** _____ **Check No.** _____

TO RESERVE BALL DIAMONDS CONTACT COMMUNITY EDUCATION AT 734-850-6036

Revised 12/09