



Veteran's Park Gazebo Rental Use Agreement

121 Lincoln Street, Johnson Creek

Contact Person: _____ E-mail: _____

Phone: _____ Event: _____

Address: _____ State: _____ Zip Code _____

Date(s) Requested: _____ Time(s) Requested: _____

1. **Reservations** – The person who signs the park reservation form is responsible for the group's actions. We ask that you please read over the information on the reservation form and follow the guidelines set forth.
2. **Fees** - \$50.00 – Make checks payable to: Village of Johnson Creek
3. **Deposit** - \$100.00 – The security deposit will be **deposited upon receipt**, and a refund check will be issued to the person listed above **within 3 weeks after the rental**, provided there is no damage to the park or its facilities.
4. **Refunds** – will be granted if cancellation is at least 10 days in advance of reservation date.
5. **Park Hours** – 8:00am to 10:00pm
6. The Village of Johnson Creek has the authority to refuse future use to any group or person who abuses park facilities or violates any rules.
7. The Village is not responsible for anything left, lost or stolen on the premises.
8. **Pets** – No pets are allowed in Village of Johnson Creek Parks.
9. **Fires** – No Grilling or fires allowed.
10. **Glass Bottles** – Glass Bottles are prohibited in all Village Parks.
11. **Vandalism** – Please help protect your parks by reporting all vandalism. (Police Dept. 920-699-2111)
12. It is understood that any Village of Johnson Creek Police Officer, Jefferson County Sheriff Officer or any other employee of the Village have the right to enter the premises at any time.
13. **Restrooms** - Timed locked - open from 6:00am – 8:00pm.
14. The Village is not responsible for any property damage or personal injuries
15. Fees that will be taken from your Security Deposit include:
 - a. Damage/Repairs – Actual Cost
 - b. Failure to observe park curfew - \$100.00

SIGNATURE: _____ DATE: _____

TOTAL \$ _____ **X 5.5% (tax)** _____ = **\$** _____

SECURITY DEPOSIT FEE: \$100.00 Refundable Security Deposit required for all users. \$ _____

Office Use Below _____

TOTAL COST: _____ DATE PAID: _____ By _____

REFUNDABLE SECURITY DEPOSIT FEE: _____ DATE PAID: _____ By _____

Refund Deposit \$ _____ Date Refunded _____

Binder _____ Website _____