

HERNANDO PARKS & RECREATION DEPARTMENT
2601 ELM STREET, HERNANDO, MS 38632
Ph 429-2688 Fax 429-2681

PARK PAVILION RESERVATION APPLICATION

√ Please check the pavilion that you are reserving.

- | | |
|---|---|
| <input type="checkbox"/> LARGE PAVILION (Sits 50-75/MIDDLE OF PARK) | \$50 FOR RESIDENT/ \$70 FOR NON- RESIDENT |
| <input type="checkbox"/> MEDIUM PAVILION (Sits 30-40/BACK OF PARK) | \$40 FOR RESIDENT/ \$60 FOR NON-RESIDENT |
| <input type="checkbox"/> SMALL PAVILION (Sits 15-20/FRONT OF PARK) | \$30 FOR RESIDENT/ \$50 FOR NON-RESIDENT |
| <input type="checkbox"/> LEE'S SUMMIT PAVILION (Sits 15-20) | \$30 FOR RESIDENT/ \$50 FOR NON-RESIDENT |
| <input type="checkbox"/> CHURCH PARK PAVILION (Sits 15-20) | \$30 FOR RESIDENT/ \$50 FOR NON-RESIDENT |

GROUPS FORMALLY ASSOCIATED WITH DESOTO COUNTY PUBLIC / PRIVATE SCHOOLS SHALL BE EXEMPT FROM FEES.
ALL FEES APPLY TO ALL NON-DESOTO COUNTY SCHOOLS.

NAME: _____ ADDRESS: _____

CITY/STATE: _____ ZIP: _____ PHONE: _____

Purpose of use: _____ Date of use: _____ Time of use: _____

*Email: _____ (For important notification purposes)

Are you a city resident? _____ YES _____ NO (*Documentation may be required*)

Is this group associated with a public or private school? _____ YES _____ NO

If yes, Name & Address of school _____

Will there be any outside amusement / entertainment devices (moon bounces, etc.) YES _____ NO _____

If yes, what type of device? _____

Will there be a petting zoo? _____ YES _____ NO

NO WATER BALLOONS

CLEAN UP AFTER USE OF PARK IS REQUIRED

**Small and large pavilion
are NOT Handicap
accessible at this time**

THE USE OF ANY SUCH ENTERTAINMENT /AMUSEMENT DEVICE OR PETTING ZOO WILL REQUIRE THAT THE PERSON OR ENTITY REQUESTING SUCH PERMIT FOR ANY SUCH USE OR USES EXECUTE A GENERAL RELEASE IN FAVOR OF THE CITY OF HERNANDO, MISSISSIPPI AND MUST ALSO PROVIDE PROOF OF LIABILITY INSURANCE COVERAGE FOR SUCH USE. THE MINIMUM AMOUNT OF LIABILITY INSURANCE SHALL BE \$500,000.00 AND MUST BE UNDERWRITTEN BY AN ADMITTED INSURANCE COMPANY WITHIN THE STATE OF MISSISSIPPI. THIS MUST BE PROVIDED TO THE CITY OF HERNANDO AT LEAST 5 DAYS IN ADVANCE.

BY SIGNING BELOW, I AGREE TO WAIVE AND RELEASE ALL RIGHTS AND CLAIMS FOR DAMAGES THAT I MAY HAVE AGAINST THE CITY OF HERNANDO, AND/OR ITS REPRESENTATIVES.

APPLICANTS SIGNATURE _____ TODAY'S DATE _____

PAVILION FEE \$ _____

UTILITY SERVICE FEE (\$15) \$ _____

PETTING ZOO FEE (\$25) \$ _____

TOTAL \$ _____

General Release signed for insurance: _____ YES _____ NO

- Rain dates must be used within 30 days of the original date of event.
- Cancellations must be made 5 days in advance of the event date in order to receive a refund. Cancellations within 5 days of event will forfeit funds.

Receipt# _____ Date: _____ Clerk: _____

429-9096 NON-EMERGENCY DISPATCH