



Town of Parker
 1314 - 11th Street Parker, AZ 85344
 Phone: (928)669-9265 Fax: (928)669-5247

| |
|--|
| <input type="checkbox"/> Approved |
| <input type="checkbox"/> Denied |
| By: _____ |
| Fees: _____ |

Park Usage Permit Application
 AVAILABLE ON A FIRST COME FIRST SERVED BASIS

Applicant Name: _____ Phone Number: _____

Applicant Mailing Address: _____

Use Date(s): _____

Start Time: _____ End Time: _____ Number of Attendees: _____

Requested Area(s) of Use: (check ALL that apply)

| Baseball Fields* | Western Park | Pop Harvey Park | Splash Park |
|--|--|---|--|
| <input type="checkbox"/> Field 1 <input type="checkbox"/> Field 2 <input type="checkbox"/> Field 3 <input type="checkbox"/> Field 4 <input type="checkbox"/> Aaron Hill Field <input type="checkbox"/> Concession Stand | <input type="checkbox"/> Grass Area <input type="checkbox"/> Ramada <input type="checkbox"/> Volleyball Court <input type="checkbox"/> Basketball Court | <input type="checkbox"/> Gazebo <input type="checkbox"/> Volleyball Court <input type="checkbox"/> Horseshoe Pit <input type="checkbox"/> Mohave BBQ Canopy <input type="checkbox"/> Agency BBQ Canopy <input type="checkbox"/> Grass Area | <input type="checkbox"/> Grass Area <input type="checkbox"/> Kite Canopy Shade <input type="checkbox"/> Corner Canopies <p style="text-align: center;"><u>The Splash Pad shall remain open to public.</u></p> |

*TOP will prep 1 time before date of use; bases/lining/cleanup are applicants' responsibility.

Do you need access to power supply? No Yes, for? _____

Restrooms: OPEN CLOSED

(Additional restrooms, port-a-pottys, must be provided by applicant if attendance is over 50 persons.)

Special Requests (if any;i.e. parking on grass, extra trash cans, etc.): _____

Sprinklers: ON OFF

Lights: ON OFF

All food for sale or being given away MUST be approved by the La Paz County Health Department.

By signing below, I acknowledge I have read the Rules and Regulations for the above listed Town Of Parker facility and I will personally be present and responsible for the above activity. I am aware proof of a one million (\$1,000,000) dollar insurance bond naming the Town Of Parker as additionally insured may be required at least fifteen (15) working days prior to this event.

Signature: _____ **Date:** _____

Relationship to Applicant: _____