



ODMARK/EAST PARK PERFORMANCE PAVILION USE REQUEST

Name of proposed act/event: _____

Date of proposed use: _____ Time of proposed use: Start _____ End _____

Expected number of attendees: _____

Is applicant a not-for-profit organization?

(Proof of non-profit status is required for consideration of reservation fee waiver.)

Yes

No

Is the proposed use directly associated with another event occurring simultaneously in Charlevoix?

Yes

No

If yes, indicate name of associated event: _____

If applicant is a performance act, please provide three references.

Name

Telephone

Briefly summarize your proposed use:

CONTACT INFORMATION

Applicant Name: _____ **Organization:** _____

Email Address (required): _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone Number: _____ **Cell Number (day of event):** _____

Has applicant or anyone significantly associated with the applicant been convicted within the past seven (7) years of a misdemeanor or felony involving violence, theft, criminal sexual conduct or dishonesty?

Yes

No

Signature of Applicant

Date

This form must be submitted at least two (2) weeks in advance of requested use date. Please contact the Charlevoix Recreation Department at 231-547-3253 with any questions.

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Chief of Police

Date

Recreation Department

Date

Approved

Denied

Approved

Denied

Fee: _____

Receipt No.: _____

Date: _____