

Park Shelter Rental Contract

Town of Holland

W7937 County Road MH, Holmen, WI 54636



\$80	Shelter #1 (kitchen facilities, open air seating)	
\$65	Shelter #2 (enclosed, electric outlets, outside water hydrant)	

Office Hours:

Mondays through

Thursdays: 8 am to 1 pm

All rentals are handled by the Town Clerk
608-526-3354 or clerk@townofhollandwi.org

Rental Date:		
Name/Business		Contract #
Contact Name	Home Phone	Other Phone
Address		City

Size of the group _____ (If more than 100 people are expected, both shelters should be reserved)

Will alcoholic beverages be served on the grounds? Yes No
*No beer, wine or liquor may be **sold** at any time without a Class "B" permit (see Town Clerk).*

What time would you like the shelter opened: _____ am / pm

How late is your group expected to stay: _____ am / pm (Park closes at 10:00 p.m.)

WE DO NO GIVE OUT KEYS! *The shelter house will be open by the time you indicated. Please lock all shelter doors/windows when you leave.*

PARK USE: It is understood that any group using the park shall leave it in as good a condition as it was found. Trash that does not fit into the available receptacles should be deposited in the dumpster located by shelter #2. Reserved use of the shelters does not preclude use of park by the general public.

UNNECESSARY NOISE: No person shall operate amplified loud speakers or other mechanical devices, including musical instruments, which produce undue or unreasonable noise which disturbs others in the park or nearby residences.

CANCELLATION: If you would cancel your reservation, you must do so within twenty-one (21) days prior to your rental date to receive a full refund. Cancellations after the twenty-one (21) day period will not be refunded unless the shelter is re-rented to another party.

We hope you enjoy our Town Park and appreciate your cooperation.

My signature below indicates that I read the above information. I accept the responsibility for the observance of all park regulations by me and/or my group and any and all damages.

Date _____

Signature _____

Office use only: Date issued _____ Approved by: _____ Date received: _____
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