



# Parks, Recreation and Senior Citizen Services

## EVENT APPLICATION

Email application to [kealat@portagemi.gov](mailto:kealat@portagemi.gov) AND [napierp@portagemi.gov](mailto:napierp@portagemi.gov)  
 Applications must be submitted **90 days** in advance of your requested event date.

Organization Name: \_\_\_\_\_

Organization Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: (Cell) \_\_\_\_\_ (Wk) \_\_\_\_\_ (Other) \_\_\_\_\_

Contact Email: \_\_\_\_\_

Requested Date of Event: \_\_\_\_\_

Requested time frame: Set-Up \_\_\_\_ (am/pm) Registration \_\_\_\_ (am/pm) Event \_\_\_\_ (am/pm) Vacate \_\_\_\_ (am/pm)

Anticipated # of participants/attendees: \_\_\_\_\_ Anticipated # of volunteers/staff: \_\_\_\_\_

Intended Walk/Run distance, if applicable: \_\_\_\_\_

Intended use areas (please include indoor facilities, outdoor space and trail areas (route) that you are requesting):

\_\_\_\_\_  
 \_\_\_\_\_

Do you have a 501c3 Non-Profit Status?	Yes	No	Will you serve food?	Yes	No
<i>Proof of status must be submitted with application</i>					
Will you need access to water?	Yes	No	Will you sell food?	Yes	No
Will you rent a large tent or canopy?	Yes	No	Will you prepare food on site?	Yes	No
Will you need access to outdoor electrical?	Yes	No	Will food be prepared at home?	Yes	No
Will you need access to heated building?	Yes	No	Will licensed vendors sell food?	Yes	No
Will you serve alcohol?	Yes	No	Will licensed vendors prepare?	Yes	No
Will you sell alcohol?	Yes	No	Do you have liability insurance?	Yes	No
Will attendees bring their own alcohol?	Yes	No			

Please briefly describe your event and any additional details here: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Revised 2/5/15