



LAKE METROPARKS

SPECIAL USE PERMIT

Name of Applicant:	
Organization (if applicable): LSLS Club Me	ember
Address:	Phone:
Email:	Fax:
Type of Permit: Exclusive Use	
Activity Description: BV Parked - Security	ty for LSLS
Location: PG-Overflow Lot Date(s) of	Use: September 4-5, 2019
Time(s) of Use: Day and Overnight Number of	Users:
Time(s) of Use: Day and Overnight Number of Users: Special Conditions: Self-contained only. No water or electric hook-up.	
By signing this permit, the applicant agrees to hold harmless and Commissioners, their individual members and all of their officers, all loss, damage, liability, and costs or expenses as may arise, or occupancy of Lake Metroparks owned or managed property u assumes all responsibility for any loss, damage or liability arising used by applicant, its agents, representatives, employees, contractor I have read and understand the above conditions and attached recreation/park area, facility, or equipment, and by my signature, a	agents, assigns, and employed from any and r may be caused in any way by the use and inder this agreement. Applicant expressly from use of the facility, equipment or areas ors or subcontractors.
Signature of Applicant	Date
Subject to the above acknowledgment of rules and conditions and charged, the use of the specified recreation and/or park area, facilit approved.	1 1 •
Authorized Agent for Lake Metroparks	Date
Permit Distribution: Applicant Registration App. Park Ops. Other Mc Frogt Desk	X Ranger Department (Kim) X Spec. Facility/ Division - Caitlin Pace Executive Director (Tammy) Other Dan Bwnett