



# APPLICATION FOR USE OF CITY PARK FACILITIES

**FORM COM- CP-1-9-22.**

**City of Mackay  
P.O. Box 509  
Mackay, Idaho 83251-0509  
208-588-2274**

**This form shall be completed and submitted to the City Clerk 5 days in advance if reserving for a day use activity. No fee\* is charged for day use activities if no vendors are present. Application must be submitted to the Mayor of the City of Mackay at least 30 days prior to the use of the requested facilities for any Event as defined by the Idaho State Tax Commission. Applicant must comply with City of Mackay Ordinances 450, and 465 which are available from the City Clerk during regular business hours.**

<b>Applicant</b>	<b>Event Sponsor</b> Check if same as Applicant <input type="checkbox"/>
Name:	Name:
Mailing Address:	Mailing Address:
City/State/Zip:	City/State/Zip:
Phone No:	Phone No:
eMail:	eMail:

### Check Applicable

<input type="checkbox"/> <b>Kid's Park Shelter W/ Electricity</b>	<input type="checkbox"/> <b>Kid's Shelter W/O Electricity</b>
<input type="checkbox"/> <b>Courthouse Square (AKA Tank Park)</b>	<input type="checkbox"/> <b>Centennial Park</b>
<input type="checkbox"/> <b>Bob Burroughs Memorial Park</b>	

**Beginning Date of Event/Activity** \_\_\_\_\_ **Ending Date** \_\_\_\_\_

**Description of Event/Activity (Attach additional pages if needed)**

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**Damage Deposit of \$200.00 is enclosed\***       **Insurance Certificate is attached**

**Hold Blameless/Indemnification Documentation attached**

<b>Applicant's Signature</b>  _____  <b>Date</b> _____	<table style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #e0e0e0;"> <th colspan="3" style="text-align: center; padding: 5px;"><b>Official Use Only</b></th> </tr> <tr> <td style="width: 33%; text-align: center; padding: 5px;"><b>Approved</b></td> <td style="width: 33%; text-align: center; padding: 5px;"><b>Rejected</b></td> <td style="width: 33%; text-align: center; padding: 5px;"><b>Need More Info.</b></td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr style="background-color: #e0e0e0;"> <td colspan="3" style="text-align: center; padding: 5px;"><b>By:</b> _____ <b>Date:</b> _____</td> </tr> </table>	<b>Official Use Only</b>			<b>Approved</b>	<b>Rejected</b>	<b>Need More Info.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>By:</b> _____ <b>Date:</b> _____		
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<b>By:</b> _____ <b>Date:</b> _____													