



APPLICATION FOR USE OF TOURIST PARK FACILITIES

FORM COM-TP-1-10.20

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

Application must be submitted to the Mayor of the City of Mackay at least 30 days prior to the use of the requested facilities.

Applicant must comply with City of Mackay Ordinance 461 which is available from the City Clerk during regular business hours.

Applicant	Event Sponsor 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 All Applicable

<input type="checkbox"/> All Tourist Park Camp Spots	<input type="checkbox"/> Gazebo (Band Stand) W/O Electricity*
<input type="checkbox"/> Gazebo (Band Stand) W/ Electricity*	

Note: Camping, Cooking, Enclosing of Gazebo is PROHIBITED
*an additional fee for use is charged per current Resolution

Beginning Date of Event/Activity _____ **Ending Date** _____

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

<input type="checkbox"/> Damage Deposit of \$200.00 is enclosed	<input type="checkbox"/> Insurance Certificate is attached
<input type="checkbox"/> Hold Blameless/Indemnification Documentation attached	

Applicant's Signature _____ Date _____	<table style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #e0e0e0;"> <th colspan="3" style="text-align: center;">Official Use Only</th> </tr> <tr> <td style="width: 33%; text-align: center;">Approved</td> <td style="width: 33%; text-align: center;">Rejected</td> <td style="width: 33%; text-align: center;">Need More Info.</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr style="background-color: #e0e0e0;"> <td colspan="2" style="text-align: center;">By: _____</td> <td style="text-align: center;">Date: _____</td> </tr> </table>	Official Use Only			Approved	Rejected	Need More Info.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	By: _____		Date: _____
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By: _____		Date: _____											