



PARK PAVILION/FACILITIES RESERVATION PERMIT

Your paid park reservation permit guarantees the listed facility is reserved for your group. Have this form with you on the day of reservation.

TODAYS DATE _____ ORGANIZATION _____
 DATE OF EVENT _____ CONTACT PERSON _____
 TIME _____ TO: _____ ADDRESS _____
 ESTIMATED # OF PEOPLE _____ CITY _____
 PHONE _____ CELL _____
 E-MAIL ADDRESS: _____

RESERVATION PURPOSE: (X)

Family/class reunion _____ Picnic _____ Party _____ Graduation _____ Scouts _____
 Church activity _____ Athletic event _____ Wedding/rehearsal/shower/anniversary - (circle)
 Community event (specify) _____ Special request (specify) _____
 Other (specify) _____

SHELTERS	#OF TABLES	CAPACITY	SHELTERS INCLUDE:
Clear Lake Park			
_____ Johnson Pavilion	60	360	Electricity/Restrooms
_____ Beach House	11	66	Electricity/Restrooms
_____ Bandshell	9	50	Electricity
Memorial Park			
_____ Octagon	10	60	Electricity
_____ Regular	6	36	Electricity/Restroom
_____ Maplewood Park	8	50	Electricity/Restrooms (Upper restroom upon request)
_____ Loon Lake Park	6	42	Electricity/Restroom (Key required)
_____ Northeast Park	25	150	Electricity/Restroom
_____ Northwest Park	8	48	Portable restroom
_____ Southview Park	5	30	Portable restroom
_____ Trowbridge Park			Electricity/Restroom
_____ University Park	12	72	Electricity/Restroom

EVENT REQUEST

Gate key - \$25.00 deposit _____ Entertainment _____ Sound amplification _____
 Barricades _____ Extra picnic tables (fee applies) _____ Extra waste receptacles _____

USER – SPECIAL REQUEST

*Inflatables _____ *Tent/stage set-up _____ *Temporary fencing _____

***USER REQUIRED TO CALL 811 (GOPHER STATE ONE CALL) FOR LOCATES BEFORE STAKING OR DIGGING**

To report any electrical problems in the park during your reservation, please call 835-9718

Cancellation Policy: Reservations cancelled for any reason, including inclement weather, will be assessed a 25% administrative fee.

Social Gathering Requirements: I agree to comply with all Local, State or Federal Executive Orders regarding outdoor gatherings. Celebrations, receptions, parties, and similar gatherings must comply with the requirements set forth in the most up-to-date executive order, which mitigates the risk of transmission of COVID-19 at these events. I agree to follow the Minnesota Department of Health recommendations to help reduce the risk of spreading COVID-19. (i.e. stay home when sick, social distancing, face coverings, etc.)

Applicant Signature _____ Approved by: _____

Finance Code: 101-34785 User Fee\$ _____ Cash _____ Check _____ Cr.Card _____

IF COMPLETED ON-LINE, E-MAIL TO: WASECAPARKRESERVATIONS@CI.WASECA.MN.US