



**TENDICK PARK SPECIAL USE RESERVATION APPLICATION**  
**OZAUKEE COUNTY PLANNING & PARKS DEPARTMENT**  
 121 W. MAIN STREET, PORT WASHINGTON, WI 53074  
 Phone: 262-284-8257 Fax: 262-284-8269

Rev. 3/16

**\*=Required**

\* RESERVATION DAY & DATE: \_\_\_\_\_

\* AREA RESERVED (CHECK THOSE YOU WILL NEED) PICNIC AREA/ PAVILION\_\_\_ GAZEBO\_\_\_ LOG CABIN\_\_\_  
*additional fee for Gazebo and Log Cabin*

**\* Bathroom facilities are not part of any reservation and are open to the general public at all times.**

\* ORGANIZATION OR GROUP \_\_\_\_\_

\* PERSON IN CHARGE \_\_\_\_\_

\* ADDRESS \_\_\_\_\_

\* CITY/ZIP \_\_\_\_\_

\* TELEPHONE NUMBER(S) \_\_\_\_\_ \* NUMBER OF PEOPLE \_\_\_\_\_

\* TIME OF ARRIVAL \_\_\_\_\_ \* TIME OF DEPARTURE \_\_\_\_\_

**YOU MUST PROVIDE YOUR OWN HEALTH AND ACCIDENT INSURANCE**

The Ozaukee County Planning & Parks Department requires a fee to be sent with this application. Fee is based on size of group. Fee Schedule is as follows:

<b>Group Of</b>	<b>Resident</b>	<b>Non-Resident</b>
<b>1-50</b>	<b>\$55.00</b>	<b>\$110.00</b>
<b>51-100</b>	<b>\$75.00</b>	<b>\$135.00</b>
<b>Over 100</b>	<b>\$95.00</b>	<b>\$160.00</b>
<b>Gazebo (additional fee)</b>	<b>\$50.00</b>	<b>\$ 55.00</b>
<b>Log Cabin (additional fee)</b>	<b>\$100.00</b>	<b>\$110.00 (no overnight stay allowed)</b>

**Payment and completed form must be received by this office within 10 business days of the day the reservation was made, whether reservation was made by phone or in person, in order to secure reservation. No follow-up calls will be made by this office to confirm your reservation if not received within that 10 day period. Sole responsibility lies with individual(s) securing reservation.**

**Your reservation is not guaranteed until the completed form and your payment are received by this office and an approved signed copy is returned to you.** Please make check payable to Ozaukee County. If for any reason you cannot use the park on the date you have reserved, please notify the Planning & Parks Department at (262) 284-8257. Your fee is not refundable if cancellation is made within 7 days of your reservation date.

**RETURN FORM & PAYMENT TO: OZAUKEE COUNTY PLANNING & PARKS, ROOM 220, 121 W. MAIN ST.  
 PORT WASHINGTON, WI 53074**

The Planning & Parks Department requires that the facilities be left in satisfactory condition. **Any damage or excessive clean-up will result in a maintenance billing and the possible loss of your group's privilege to use the facility in the future.** Please have beverages in can or plastic containers. **NO GLASS – PLEASE!**

Ozaukee County Ordinance 5.01 Rules and Regulations Governing County Parks must be followed with the use of the Ozaukee County Park System and/or any local municipal ordinances as relevant. (Over)

# INDEMNIFICATION AGREEMENT

By signing this document, the ORGANIZATION, GROUP or INDIVIDUAL listed hereby agrees to indemnify Ozaukee County for any and all damage or injury to any persons or property, which is in any way attributable to the above referenced event due to the organization's act or omission in the Ozaukee County Park System.

Under no circumstances will Ozaukee County be held responsible for damage to the Ozaukee County Park System, or be held responsible for damage to an adjoining private property as a result of the above referenced event and organization's act or omission. The ORGANIZATION or GROUP (SPONSOR) listed above accepts all such responsibility and agrees to indemnify Ozaukee County for any such claims related to the specified event and organization's act or omission.

The ORGANIZATION, GROUP or INDIVIDUAL should provide his or her own health and accident insurance. Ozaukee County may require a certificate of insurance and recommended coverage and/or require that Ozaukee County be listed as an "additional insured" for an event. The Public Works Committee of the Ozaukee County Board of Supervisors will determine the necessity of a certificate of insurance, recommended coverage, and "additional insured" listing based upon this application and description of the event.

**I acknowledge the above requirements for the group use of the Ozaukee County Park System.**

\* CUSTOMER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**For Office Use Only:**

**PERMIT APPROVED BY** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Ozaukee County Planning & Parks Director**

**Paid \$** \_\_\_\_\_ **Ck #** \_\_\_\_\_