

Town of Eatonville
Glacier Park

P.O. Box 309
Eatonville, WA 98328

Application for Use

Organization/Agency/Business: Family Reunion

Person in Charge: Bobbi ALLISON

Phone Number: _____

Email Address: _____

Mailing Address: _____

Type of Activity: Family Live Entertainment if yes, kind: none

Will Alcohol be served: Yes _____ No , you will be required to get a banquet permit

Date Requested: 5/18/24 Time Requested: 8am am/pm TO 8 am/pm

Estimated Group Size: 40 Open to the public: Yes _____ No _____

Kitchen Use: Yes No _____ Bathroom Use: Yes No _____ Stage Use: Yes _____ No

The Town of Eatonville, its employees, appointed or elected persons, shall not be held liable for injuries or loss or destruction of property resulting from the use of the premises or facilities. Applicant agrees to defend, indemnify and save harmless the Town, its appointed and elective officers and employees from and against all lost and expense including but not limited to judgment, settlements, attorney's fees and costs by reason of personal or bodily injury including death at any time resulting there from sustained by any person or persons and in account of damage to or loss of property, including loss of use thereof arising out of or in consequence of the performance of the stated activity; as a result of the negligence of persons other than the Town of Eatonville. Applicant is responsible for the supervision and control of group or individuals to prevent injury and ensure safety, as well as all aspects of use, including payment of fees and charges, damage to equipment, property, or grounds, which may be incurred. I understand that all Town of Eatonville ordinances apply to this rental application. I acknowledge that I have reviewed the information on both sides of this form.

NAME: Bobbi Allison