

Lake Region Recreation Center, Inc.

Physical Address: 29371 State Highway 78 Battle Lake, MN

Mailing Address: PO Box 191

Ottertail, MN 56571

Application for Event to be held at LRRC:

Name of Event: _____

Name of Organization: _____

Contact Person in Charge: _____

Contact Email Address: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____

Application should be filled with LRRC board of directors at least 45 days prior to beginning of event (we meet the 3rd Sunday of the month May-Sept)

Date(s) of Event:

Estimated # of people attending event:

Briefly describe your event & activities (attach separate sheet, an schedule or event flyer)

Event host will collect suggested camping donations from participants.

LRRC is not responsible for accidents. Event host agrees to hold LRRC harmless.

Will the event host provide LRRC with a certificate of liability insurance (yes/no)?

Event host will collect suggested camping donations from participants:

\$10 per person per night

Suggested Donations to secure event dates: half down

Up to 50 people: \$500

51+ people: \$1000

Total amount: _____

Event host agrees to conduct their event in accordance with the LRRC By-laws and posted rules. All fees or fines for this event will be responsible to the event host. By signing below we agree to the above and all information provided is true and correct.

Name of event host: _____

Signature & title: _____

Date_____