



City of Gladstone
1100 Delta Avenue, PO Box 32
Gladstone, Michigan 49837
(906)428.9222 (906)428.2311

Date Received _____

SPECIAL EVENT PERMIT APPLICATION

Application:

Name of Sponsor Non Profit ID #

Address City/Zip

Business Fax Number

**Person in
Charge of
Activity:**

Name

Address City/Zip

Business Phone Home Phone

**Event:
Type
and Location**

**Est. # of
Participant's:**

Dates:

From _____ 200_ To _____ 200_

Hours Of Operation:

Set Up _____ to _____
Event _____ to _____
Clean -Up _____ to _____

Special Request

Waiver of Liability

Name of Event: _____ **Date of Event:** _____

_____ Shall indemnify, and hold harmless the City of Gladstone, its officers, employees and agents from and against any and all claims, demands, liability, costs and expenses of whatever nature, including court cost and counsel fees arising out of injury to or death of any person or persons or loss of or physical damage to any property resulting in any manner from the willful misconduct acts, or negligence of the applicant, its sub-consultants, agents, employees, volunteers, licensees, or guest in the making or performance of this Special Event Permit.

It is understood the City of Gladstone issues the permit in order to review and approve all plans for events which will affect public facilities or the public right of way.

Note: General Liability Coverage with a minimum limit of liability of \$1,000,000.00 is required.

Name: _____

Title: _____

Signature: _____

Date: _____

Waiver of Subrogation

The lessor waives all rights of recovery against the lessee, lessee's employees, agents and invites for any loss or damage to property of the lessor located at the premises covered by the Special Events Permit, including property insured under valid and collectible insurance policies, to the extent of any recovery collectible under such insurance.