



ANDREWS PARK SPLASH PAD GROUP BUS APPLICATION

CHAMPLIN PARKS & RECREATION
11955 Champlin Drive * Champlin, 55316
763-421-2820 / Fax: 763-421-7624 / clehn@ci.champlin.mn.us
ci.champlin.mn.us

GROUP APPLICATION

Main Group Contact: _____ Day of Phone#: _____

Name of Group: _____

Group Address: _____

Email: _____ Number of Buses: _____

Phone #2: _____ Date Requested: _____

Estimated Number of Group Size: _____

***Checks made payable to City of Champlin**

***Credit cards subject to a \$3.00 convenience fee**

Please indicate requested services Andrews Park * 7200 – 117th Ave N * Champlin, 55316	
_____ Bus Parking	\$35 per bus (all day)
_____ Picnic Shelter (Capacity 105)	\$150 (plus tax) per 4 hours
_____ Shade Shelter (Capacity 15-20)	\$80 (plus tax) per 4 hours

Credit Card Payment (\$3.00 convenience fee)			
Credit Card Number	Expiration Date	CVV Code (3 digit)	Amount Due

Signature _____ Date _____

APPLICANT'S RESPONSIBILITY

I have reviewed the rules, regulations and ordinances governing the use of this application and facilities. I understand these items, including cancellation procedures, liabilities and responsibilities assumed by me. I understand I am assuming full responsibility for the park facility I am requesting, even if I represent an organization. I understand this is only an application for use providing me with no assumed or implied rights for use until written approval is received.

Specifically and without limiting the generality of the foregoing, the undersigned hereby agrees to save, defend and hold harmless the City of Champlin for any damages to City personnel, facilities, equipment of other City property, or to the property and/or person or any third party, resulting from the use herein applied for. The undersigned understands the City will not be liable for damage to property of any person participating in activities applied for herein, nor shall it be liable for death or injury of any such person occurring in result from use of the facilities as applied for herein.

Signature _____ Date _____