

# ALCOHOLIC BEVERAGE PERMIT

Name of Town owned facility permit is requested for: \_\_\_\_\_

Organization/Individual requesting permit: \_\_\_\_\_

Address of Organization/Individual: \_\_\_\_\_

Reason for request: \_\_\_\_\_

Date of Use: \_\_\_\_\_ Time of Use: \_\_\_\_\_

Person requesting permit: Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

The undersigned as \_\_\_\_\_ of the above named organization hereby, on the part of that organization, releases the Town of Mt. Pleasant, its Town Board, employees and volunteers of any liability whatsoever in connection with any damages and/or injuries that any participant of the above organization may sustain as a result of his/her participation in that event.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Witness)

\_\_\_\_\_  
(Title)

Approved by: \_\_\_\_\_  
(Town Clerk)

Issued Date: \_\_\_\_\_

cc: Recreation & Parks Department

**TO BE POSTED**