## City of Margate Parks and Recreation Department Facility Use Permit Application

NAME OF OR	GANIZATION:				Public Records
CONTACT PERSON:					
ADDRESS:					Exemption
CITY: STATE: ZIP CODE:					redaction form.
			/		
FACILITY REG	QUESTED:	(Daytime)	(Daytime) (Evening)		
Leonard	Weisinger Comm	unity Center Le	eonard Weisinger Meeting	g Room	
Charley H	Katz Community (	Center			
Pavilion at (list name of park):					
Athletic Facility (list name of facility and park):					
Mobile stage (list location)					
Date(s) Requested: Start Time: End Time:				ne:	
Purpose for R	tental:				
Number of Ar	nticipated Attende	ees:			
Please check ALL that apply:RESIDENT ALCOHOL PRIVATE VENDOR (Insurance required)					
I have receive	ed a copy of the	City of Margate Renta	al Guidelines:		
	Signature	_	Date		
		(For Office Us			
Rental fee amount due \$ Security deposit amount due \$ Alcohol fee amount due \$					
Alconoriee	_				
Approved Not Approved Michael A. Jones					
			ks and Recreation		
Record of Pay	• •	DECEIDT #	DECCRIPTION	CTAEE	
DATE	AMOUNT	RECEIPT #	DESCRIPTION Security Deposit	STAFF	
			Rental Payment		
			Alcohol Fee		