



WOODLAND PARK
CITY ABOVE THE CLOUDS

Department Use Only

Application for Liquor in Memorial Park

1. Name of applicant: _____ Date: _____

2. Date of event: _____ 3. Hours of event: _____ 4. Estimated number of people attending: _____

5. Type of event: _____ 6. Type of alcohol being served: _____

7. What type of food will be served during the event?

8. How will the alcohol be controlled during the event?

9. How will you prevent minors from being served during the event? A minor is any person under the age of 21.

10. How will you made sure alcohol stays in the designated area during the event?

This agreement releases The City of Woodland Park from all liability relating to injuries that may occur during the event. By signing this agreement, I agree to hold The City of Woodland Park entirely free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence. I also acknowledge the risks involved in consuming alcoholic beverages. I swear that I am participating voluntarily, and that all risks have been made clear to me. By signing below I forfeit all right to bring a suit against The City of Woodland Park for any reason. I will also make every effort to obey safety precautions as listed in writing and as explained to me verbally. I will ask for clarification when needed.

Signature of applicant: _____ Date: _____

Internal Use Only

Date application received: _____ Date application approved: _____

Signature _____ Title _____ Date _____