



CITY OF WALKER
PO BOX 207
205 MINNESOTA AVENUE WEST
WALKER, MN 56484
218.547.5503(PHONE)
218.547.5513(FAX)

CITY OF WALKER DONATED PICNIC TABLE USAGE POLICY

- TABLES MAY BE RESERVED ON A FIRST COME, FIRST SERVE BASIS AND ARE NOT TO BE TAKEN OUT OF THE CITY LIMITS.
- COMMUNITY/CIVIC ORGANIZATIONS MAY UTILIZE PICNIC TABLES AT NO COST UPON APPROVAL OF ADMINISTRATOR OR PARK BOARD.
- PICNIC TABLES MUST BE PICKED UP AT WALKER CITY PARK AND BE RETURNED THE NEXT BUSINESS DAY BEFORE 12 NOON. THE CITY OF WALKER WILL NOT DELIVER TABLES.
- DAMAGED TABLES RETURNED WILL BE BILLED. \$250.00
- PICNIC TABLES REMOVED FROM SITES/SHELTERS WITHOUT APPROVAL OF THE PARK BOARD WILL BE VIEWED AS STOLEN PROPERTY AND SUBJECT TO PROSECUTION.

REQUEST FOR USE OF DONATED PICNIC TABLES
Submit request form to Walker City Hall at least 30 days prior to the event.

Date of Application _____

Request is made by _____
Name and/or Organization Name

Mailing Address

Telephone Number _____ Email (optional) _____

Purpose the Picnic Tables will be used for: _____

Date(s) Requested _____ Time(s) _____

Number of Picnic Tables _____ Date tables will be returned _____ Time _____

I agree to return the Picnic Tables in the same condition that I obtained them. If any activity results in the destruction or damage of City Property or Facilities, then the Organization/Individual agrees to pay for full replacement and/or repair of the City Property or Facilities that were destroyed or damaged.

(Signature of Requestor) (Date)

RELEASE/HOLD HARMLESS AGREEMENT

As lawful consideration for being permitted access to City Property for the purpose of

_____, scheduled for the following date/dates

_____, the undersigned, hereby assumes all risk for any injuries or damages suffered by anyone as a consequence of the negligence of the sponsor, its agents, employees, or other parties involved arising out of having use of City Property. I _____ do hereby release and hold harmless the City of Walker or any of its agents, officials, servants and employees from any liability or causes of action, which might arise by reason of granting of this permit.

(Signature of Requestor) (Date)

(Signature of City Official authorizing request) (Date)