

_____ *The person, corporation, entity or group and all individuals in the corporation, entity or group shall adhere to KRS Chapter 148 and Title 304 of the Kentucky Administrative Regulations, including all relevant laws and regulations at all times while on land owned by, leased to or under the control of the Commonwealth of Kentucky, Department of Parks.*

_____ *Access and participation in the activity or activities authorized by the Commissioner shall occur only as set forth in this permit.*

_____ *The designated activity areas may include lands that have restricted use and the person, corporation, entity or group and all individuals in the corporation, entity or group shall adhere to these restrictions.*

_____ *The person, corporation, entity or group and all individuals in the corporation, entity or group agrees to become familiar with the land authorized for use prior to beginning the approved activity. If there is a question regarding the time, location, or nature of the permitted activity, the person, corporation, entity or group shall seek clarification prior to beginning the approved activity.*

_____ *The person, corporation, entity or group understands that this permit may not be transferred or assigned to another person, corporation, entity or group.*

_____ *The person, corporation, entity or group assumes all risk and responsibility for any personal injury (including death) or property damage that arises out of the authorized event.*

_____ *The person, corporation, entity or group agrees to indemnify, defend and hold harmless the Commonwealth of Kentucky, Tourism, Arts and Heritage Cabinet, Department of Parks, their employees, designees, or licensees, against any claim of any person for damages for personal injury (including death) or property damages that result in whole or part from the authorized activity.*

_____ *The person, corporation, entity or group agrees to obtain and have in force One Million Dollars (\$1,000,000.00) in liability insurance coverage during any and all on-site activities including practices and preparation for the Event, and continuous liability insurance coverage to the conclusion of the Event, including tear down and removal of personal property. Said liability insurance coverage shall have the Commonwealth of Kentucky, Department of Parks, as named insureds. The person, corporation, entity or group agrees to provide a copy of said insurance liability certificate to the Park, prior to the Event. **Failure to provide proof of insurance – before the tournament begins – shall be grounds to cancel the tournament.***

_____ *The person, corporation, entity or group agrees to provide sufficient staff to manage the Event and understands that **the park premises serve only as a venue**; all staffing, collection of fees, parking activities, direction of traffic, set-up, staging, monitoring, tear-down, clean-up, and any other requirement for the Event, is the sole responsibility of the Event host, not the Kentucky Department of Parks, their employees, contractors, volunteers, or assigns.*

THE UNDERSIGNED, AS CONTACT PERSON, AGREES TO THE TERMS AND CONDITIONS OF THE EVENT PERMIT APPROVED BELOW.

SIGNATURE OF CONTACT PERSON

DATE

NAME OF EVENT: _____

NUMBER OF BOATS: _____

FEE/CHARGE PER BOAT: _____

LIST FACILITIES AND AREAS ON THE PARKS TO BE USED: _____

WILL USE OF UTILITIES BE REQUIRED TO ACCOMMODATE USE? YES ___ No ___

IF YES, EXPLAIN: _____

WILL EQUIPMENT, SIGNS OR OTHER ITEMS BE PLACED ON THE PARK TO SUPPORT USE? YES ___ NO ___

IF YES, EXPLAIN: _____

WILL ANY FOOD, DRINK OR ALCOHOLIC BEVERAGE BE SOLD OR MADE AVAILABLE TO PARTICIPANTS AND GENERAL PUBLIC DURING USE OF THE PARK: YES ___ NO ___

IF YES, EXPLAIN: _____

WILL ANY GOODS, SERVICES OR MEMBERSHIPS BE SOLD DURING USE OF THE PARK? YES ___ NO ___

IF YES, EXPLAIN: _____

SET-UP TIME: _____ EVENT TIME: _____

BREAK-DOWN AND OUT TIME: _____

ANY OTHER ADDITIONAL INFORMATION YOU WOULD LIKE TO ADD:

PLEASE SUBMIT THE APPLICATION TO YOUR DESIRED PARK, ATTENTION: PARK MANAGER

ALLOW A MINIMUM OF 4 WEEKS FOR REVIEW AND PROCESSING

***** FOR OFFICE USE ONLY*****

Date received:

Dates permitted activity may occur:

Permit expires:

Space/Facilities to be utilized:

Conditions: The following conditions must be met:

Park usage fee:

Approved by: _____

Park Manager

Date: _____

This approved application shall serve as a Fishing Tournament Permit and shall be maintained by the contact person who shall show it upon request during events on the Department of Parks lands.