

WEDDING APPLICATION

This information is required pursuant to Act 451, P.A. 1994, as amended, to conduct a wedding rental.

APPLICANT INFORMATION

APPLICANT #1:	APPLICANT #2:
ADDRESS:	PHONE:
CITY, STATE, ZIP CODE:	EMAIL:

WEDDING INFORMATION

SITE REQUESTED:	DATE REQUESTED:
TIME REQUESTED:	RENTAL FEE:
# OF CHAIRS REQUESTED:	APPROXIMATE NUMBER OF PEOPLE:

SPECIAL REQUIREMENTS

ELECTRICITY (Explain):
OTHER (Explain):

DAY OF CONTACT

CONTACT:	PHONE:
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LIABILITY: In filing this application for a wedding, the applicant assumes responsibility for injury or damage of any kind to person or property (regardless of who may own the property) arising out of or suffered through any act of commission or omission of the applicant, its employees, agents, contractors, or guests in connection with its use of Mackinac State Historic Parks (MSHP) facilities. The applicant agrees to indemnify and hold harmless the State of Michigan and Mackinac Island State Park Commission for all damages, claims, expenses, or other liability due to personal injury or death, or damage to property of others, arising out of or suffered through any act of omission of the applicant, its employees, agents, contracts, or guests in connection with its use of MSHP facilities.

By submitting the application, I confirm that I have read, understand, and accept the wedding guidelines for my chosen site, including the liability statement above.

SIGNATURE

DATE

Send check or money order (no cash) made payable to **MACKINAC STATE HISTORIC PARKS**. Your application will not be processed, nor will your event date be confirmed, without full payment.

RETURN COMPLETED APPLICATION & FEE TO: Winter (October-April):
 Mackinac State Historic Parks
 Attn: Group Travel and Special
 Events Coordinator
 PO Box 873
 Mackinaw City, MI 49701

Summer (May-September):
 Mackinac State Historic Parks
 Attn: Group Travel and Special
 Events Coordinator
 PO Box 370
 Mackinac Island, MI 49757

FOR OFFICE USE ONLY

Fee Received Yes No Date Received _____ Initials _____