

BOIS BLANC TOWNSHIP
PO BOX 898
POINTE AUX PINS, MI 49775

Agreement for Consuming Alcohol – Addendum to Wagner Room Rental

Date of Function: _____

Hours Alcohol will be consumed: From: _____ **am/pm to** _____ **am/pm**
No alcohol can be served after 11:30pm and the building must be vacated by 12:00am

Responsible Party: At least one responsible person over the age of 21, approved by the Bois Blanc Township Board, must be present at all times while alcohol is being served. The responsible person(s) will ensure that no alcohol will be provided to minors or any visibly intoxicated person.

Name of Responsible Party: _____ **(please print)**

(signature)

Name of Responsible Party: _____ **(please print)**

(signature)

INSURANCE: Proof of insurance naming Bois Blanc Township as insured must be provided one week before the scheduled event.

Insurance Company: _____

Policy Number: _____

****The keys to the Wagner Room will NOT be released until insurance is provided and all fees and deposits have been paid.**