IDPR FORM
GUP #225
Rev: 02-20-26

STATE OF IDAHO

DEPARTMENT OF PARKS AND RECREATION

GROUP USE PERMIT APPLICATION

Date of Application: _____

Park Name: _____

IDAPA 26.01.20 – RULES GOVERNING THE ADMINISTRATION OF PARK AND RECREATION AREAS AND FACILITIES

225.04 Group Use

a. Groups of twenty-five (25) persons or more, or any group needing special considerations or deviations from these rules shall have a permit. Permits may be issued after arrangements have been made for proper sanitation, population density limitations, safety of persons and property, and regulation of traffic.

b. Permits for groups of up to two hundred fifty (250) people may be approved by the park manager with thirty (30) days advance notice. Permits for groups of two hundred fifty (250) people or more may be approved by the director with forty-five (45) days advance notice.

Desired Event (Park) Location: _____ **Date(s) of Use:** _____

Name of Event: _____

Organization or Group Filing Application: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone: _____ **E-mail Address:** _____

Number of People Expected: _____ **Number of Vehicles Expected:** _____

Type of Vehicle expected: Passenger vehicles ☐ Buses ☐

Arrival Time: _____ **Departure Time:** _____

Type of Use Requested (please describe) _____

_____

_____

_____

Required Park Facilities (incl. shelters) _____

_____

_____

Estimated Gross Fees Collected _____

Person(s) In Charge of Group Activity Planned in Park

(Primary Person)

Name: _____

Address: _____

Telephone: _____

E-Mail: _____

(Secondary Person)

Name: _____

Address: _____

Telephone: _____

E-Mail: _____

Will First Aid Be Provided? ☐ Yes ☐ No

Will Alcoholic Beverages Be Served? ☐ Yes ☐ No

Will Alcoholic Beverages Be Sold? ☐ Yes ☐ No Permit or License # _____

If being served, Liquor Liability Insurance is required.

For alcohol sales, please list the special permit number from the Alcohol Beverage Control or your retail license number. For more information about selling alcoholic beverages, call toll free (888) 222-1360 or e-mail to abc@isp.state.id.us.
NOTE: Approval by Idaho Park and Recreation Board is required for all group functions at which alcoholic beverages will be sold.

Description of the Specific Area(s) of the Park Requested for Use (use extra sheet or map if necessary, to delineate general area of use, parking, sanitation, etc.)

_____

_____

Plans for Law Enforcement and/or Crowd Control, Including Communication Systems (Use extra sheet if necessary)

_____

_____

Plans for Parking and Traffic Control (Use extra sheet if necessary)

_____

_____

Plans for Sanitation, Garbage Disposal, and Water Supply (Use extra sheet if necessary)

_____

_____

Plans for Area Clean Up and Rehabilitation (Use extra sheet if necessary)

_____

_____

Description of Program, Displays, and Concession Booths to be installed. (Use extra sheet if necessary)

_____

_____

List of Vendors **Items They Plan to Sell** (Use extra sheet if necessary)

_____ _____

_____ _____

_____ _____

_____ _____

All vendors must have the appropriate Seller's Permit and insurance certificate on file with the park by the date of the event.

For more information concerning a Seller's Permit, call the Idaho State Tax Commission at (208) 334-7660 or read: http://www.tax.idaho.gov/.

The event organizer must provide IDPR a Certificate of Insurance naming the following as additional insureds:

State of Idaho
Department of Parks and Recreation
5657 Warm Springs Ave
Boise, ID 83716

For more information on insurance requirements, please inquire with the Park Manager.

Event liability insurance information:

Name: _____

Address: _____

City: _____ **State:** _____ **Zip**: _____ **Telephone**: _____

Amount of Liability Insurance _____

GROUP USE FEES

Fees that will apply to this application - to be filled out by Park Manager:

- ☐ _____% of all gross receipts collected. Estimated Amount $_____
- ☐ $_____ Deposit
- ☐ $_____ Damage Deposit
- ☐ $_____ Negotiated Fee
- ☐ $_____ Per-Person Fee
- ☐ $_____ Reservation Fee plus Tax
- ☐ $_____ Shelter Fee
- ☐ $_____ Other _____

$_____ TOTAL + % of Gross Receipts if Applicable

MVEF (Motor Vehicle Entrance Fee) Required ☐ Yes ☐ No

Please provide justification for waiver of fees if applicable: _____

_____

_____

_____

Note: If the Park Board-approved fee structure is waived, there needs to be two levels of review/approval and the affected revenue must be recaptured elsewhere.

REQUIREMENTS

The normal use of all facilities shall be limited to the number of people who can be accommodated by available utilities and safely handled by law enforcement. This number shall be determined for each park in accordance with health and legal requirements.

No organized group shall exceed the use limits as may be set forth by the Department without qualified representatives of the Group meeting with the Idaho Park and Recreation Board at a regular meeting no less than sixty (60) days prior to the requested date of use to discuss the proposed use and obtain approval.

All other Idaho Department of Parks and Recreation rules shall be in effect and will be adhered to by the Group.
See https://adminrules.idaho.gov/rules/current/26/260120.pdf.

A Group Use Permit may be denied if it appears to the Director of the Idaho Department of Parks and Recreation that the group use would result in permanent injury to the park facilities or environs, or if the group use would preempt use of the park by the general public during a time period when use of the park area by the general public is projected to be near capacity.

Food Service: Non-profit, fraternal organizations, schools and churches are exempt for one-day-a-week events or meals. No food service license is required. All other public food events (one or more days) must be licensed by the local health district office.
See https://adminrules.idaho.gov/rules/current/16/160219.pdf (Idaho Food Code).

PLEASE PRINT

Name of Event: _____ **Date(s) of Use** _____

Applicant Name: _____ **Applicant Title:** _____

Address: _____

City: _____ **State:** _____ **Zip**: _____ **Telephone**: _____

I HEREBY ACCEPT THE PERMIT SUBJECT TO ALL THE TERMS AND CONDITIONS IMPOSED UPON ITS ISSUANCE.

Applicant Signature _____ **Date** _____

IDPR USE ONLY

Repeat Applicant ☐ Yes ☐ No

Approved Subject to Conditions ☐ Yes ☐ No

Conditions: _____

_____

APPROVAL

_____ _____
Park/Program Manager Date

_____ _____
Region Bureau Chief Date

_____ _____
Operations Division Administrator Date

_____ _____
Director Date

_____ _____
Board Chairperson Date