

**HARRISON COUNTY**  
SAND BEACH DEPARTMENT

842 COMMERCE STREET • GULFPORT, MISSISSIPPI 39507  
(228) 896-0055 • FAX (228) 896-0059



**BEACH EVENT APPLICATION**

Application Fee \$25.00 (NON-REFUNDABLE)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Business/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Night Phone: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Time of Event: \_\_\_\_\_  
From To

Number to Attend: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Alternate Location: \_\_\_\_\_

Activities to be Held:

Crowd Control Procedures:

Your Signature: \_\_\_\_\_

Sheriff Signature: \_\_\_\_\_

County Approval: \_\_\_\_\_

**Chuck Loftis**  
Director of Sand Beach

## HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

In consideration of Harrison County, Mississippi issuing a Bon Fire Permit or Beach Event Permit (whichever is applicable) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged,

\_\_\_\_\_  
*Printed Name*

does hereby agree and obligate him/her, their company, their heirs, employees, executors, successors, and assigns to save, hold harmless, and indemnify Harrison County, the State of Mississippi, and their duly elected officials, agents, servants, and employees, from any and all claims, civil actions, damages, expenses and costs of every kind and character, whether at law or equity, or otherwise, arising from or related to the operation or the activities under the subject permit or their customers as described and contemplated in the Vendor/Event Permit \_\_\_\_\_ issued by Harrison County, MS and specifically agrees to indemnify Harrison County, MS, the State of Mississippi, and their duly elected officials, agents, servants, and employees from all damages and expenses of whatsoever kind, including but not limited to any expenses and attorney's fees incurred by them relating to any such claims, civil actions or damages.

Witness the signature of the undersigned this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Drivers License#:** \_\_\_\_\_

**Approved:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Vendor/Event Permit Holder acknowledges receipt of rules and regulation for activity being permitted: (Check one)**

**Yes:** \_\_\_\_\_

**No:** \_\_\_\_\_