

CITY OF LAKE FOREST ATHLETIC FIELD/GYM RESERVATION APPLICATION

ORGANIZATION NAME: _____

Phone Number E-Mail Address

REPRESENTED BY: _____

Authorized Representative Title

ADDRESS: _____

Street City Zip

WILL YOU BE SELLING CONCESSIONS? Yes _____ No _____ (Please attach list of items to be sold)

FIELD(S)/GYM REQUESTED	ACTIVITY	DAY(S) OF WEEK	DATE(S)	HOURS FROM-TO

AGE GROUP: _____ BOYS: _____ GIRLS: _____

USE AGREEMENT

1. Applicant hereby agrees to indemnify and hold harmless the City of Lake Forest, the Parks and Recreation Commission, and their officers, agents, or employees, from any liability or claim for damages for personal injury including accidental death and for property damage which may arise in connection with the above reserved use of the park facility and equipment. The applicant agrees to furnish such liability or other insurance for the protection of the public and the City of Lake Forest as the City may require.
2. I, the undersigned, hereby certify that I will be responsible on behalf of myself and the applicant I represent for any damages sustained to the City of Lake Forest building, equipment, or grounds accruing through the use of said building and/or grounds by the applicant.
3. *I hereby certify that I have read the attached rules, regulations, and terms of this application and that I or the applicant which I represent, will abide by them and all other directives of the City of Lake Forest and its authorized agents, which may be communicated to the applicant.*

Signature of Authorized Representative

Approval of Authorized City Representative

Date

Date

(FOR OFFICIAL USE ONLY)

FIELD: \$ _____ DATE PAID: _____

LIGHTS: \$ _____ RECEIPT #: _____

TOTAL: \$ _____