



APPLICATION FOR RESERVATION PARK USER PERMIT

25550 Commercentere Dr, SUITE 100
LAKE FOREST, CA 92630
(949) 461-3450

ORGANIZATION: _____

Phone Number

E-Mail Address

REPRESENTED BY: _____
Authorized Representative Title

ADDRESS: _____
Street City Zip Daytime Phone

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

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

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 Responsible Individual

Approval of Authorized City Representative

Date

Date

(FOR OFFICIAL USE ONLY)

FIELD: \$ _____

DATE PAID: _____

LIGHTS: _____

RECEIPT # _____

TOTAL: \$ _____