



## SINGLETON PARK FIELD USE PERMIT

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact during event \_\_\_\_\_ Phone \_\_\_\_\_

Date(s) of event \_\_\_\_\_ Time of event \_\_\_\_\_

Park Field \_\_\_\_\_ Nature of event \_\_\_\_\_

Circle Day(s) requested: Mon Tues Wed Thur Fri Sat Sun

Estimated attendance: adults \_\_\_\_\_ youth \_\_\_\_\_

I hereby certify that I am the authorized representative of the above user organization or the individual applicant, that the above statements are true to the best of my knowledge, and that I agree to be bound by the regulations, policies and fee schedules set forth in the Rules, Regulations, and Fee Schedule for the use of Manson Parks Fields. I will provide the Parks Office with practice/game schedules prior to first field use, which will include a check in and checkout time. I accept the responsibility for all clean up when done and I understand that I am fully responsible for any damage that occurs during use of the fields. I acknowledge and accept that I will be charged a \$100 cleaning fee if the field is littered or damaged. The user shall procure and maintain for the duration of the event, insurance against claims for injuries to persons or damage to property, which may arise from or in connection with use of premises. User shall provide a certificate of insurance evidencing: The Manson Parks and Recreation as an insured on the user's policy. The General Liability insurance shall be written with limits no less than \$1,000,000 each occurrence and \$500,000 personal injury coverage. The user's insurance certificate evidencing shall be required prior to field use.

I agree, personally or on behalf of the above named user organization to defend, indemnify and hold harmless the Manson Parks and Recreation District, its officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of use of fields or from any activity, work or thing done, permitted, or suffered by user organization or myself in or about the fields.

Additionally, I agree that all current State and Federal COVID-19 guidelines will be followed and enforced to the best of our ability while the facility is in use.

\_\_\_\_\_  
Signature of Applicant or Representative      Print Name      Title      Date

**\*\*For Administrative Use Only\*\***

Approved By: \_\_\_\_\_  
Signature      Date

Insurance Required: Yes \_\_\_ No \_\_\_ Day and Time Approved for Field Use: \_\_\_\_\_

*In Parks We Play*

