



**AMPLIFIED SOUND USE has
 SPECIAL REQUIREMENTS**

Application For Use Of PARK SHELTERS

- Please print or type legibly and fill out form completely.
- Submit application and pay all fees at least 7 days prior to use.
- Make payment by Cash, Check payable to *City of Forest Grove* or Credit Card.
- Reservations are not confirmed until payment has been received at the Forest Grove Aquatic Center.

APPLICANT INFORMATION

Organization Name (if applicable):	Person Responsible for Reservation:
Address:	Contact Phone #:
City/ Zip Code:	Other Phone #:

RESERVATION INFORMATION

Type of Activity: <input type="checkbox"/> Private Function <input type="checkbox"/> Event (Open to general public)	Date of Reservation: <i>Note: Reservations are taken up to six months in advance.</i>
Estimated attendance: <input type="checkbox"/> 1 to 50 people <input type="checkbox"/> 51 to 75 people <input type="checkbox"/> More than 75 people* *Director approval: <input type="checkbox"/> Granted <input type="checkbox"/> Denied	Time Block Desired: From: _____ am / pm To: _____ am / pm <i>Note: City Parks are open from sunrise to one hour after sunset.</i>

Shelter Facility Requested:

- | | |
|--|--|
| <input type="checkbox"/> Bard Park (NO RESTROOMS AVAILABLE)
2921 22nd Avenue | <input type="checkbox"/> Rogers Park
2421 17th Avenue |
| <input type="checkbox"/> Lincoln Park Shelter #1
2725 Main Street | <input type="checkbox"/> Thatcher Park
750 David Hill Road |
| <input type="checkbox"/> Lincoln Park Shelter #2
2725 Main Street | |

Other use of park property, or any use of the areas outside the specific rental area mentioned in this permit are not subject to a rental fee/charge, and pursuant to the immunities of ORS 105.682 et seq., the City of Forest Grove is not liable for injuries, deaths, or property damage arising out of use of the property beyond the rental area written in this permit.

FEES

Reservations are taken in 4 hour time blocks

- IN CITY \$49.00**
 OUT OF CITY \$98.00

I hereby agree to be responsible for the safekeeping of the facilities used for this activity and for payment of all charges. I will cooperate fully with Parks Maintenance personnel. If applicable, I have submitted or will submit a Certificate of Liability Insurance Coverage in accordance with the Parks and Recreation Field Use Policy. I agree to indemnify, defend and hold the City of Forest Grove harmless from all liability resulting from use of City fields and facilities.

 Print Name of Responsible Party

 Signature of Responsible Party

- FOR OFFICE USE ONLY -

APPLICATION: Approved Denied
 Schedule Exception: Approved Denied
 Insurance: Not Required Received On _____
 Notes: _____

FEES:
 Reservation Fee: \$ _____
 Other _____: \$ _____
Total Amount Due: \$ _____

Date Entered: _____
 Staff Initials: _____
 Posted on Master Schedule
 Faxed to Parks Maintenance
 Posted on Recreation Calendar