| CITY OF GREENSBURG recreation departmentST CLAIR PARK RENTAL APPLICATION |
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| Applicant Information |
| Applicant Name (must be 18 years of age or older):  |
| Driver’s License No: State: | Address: |
| City: | State: | ZIP Code: |
| Email: | Home Phone: Cell Phone: |
| event CONTACT information |
| Organization: Non-Profit \_\_\_\_\_\_\_ For-Profit \_\_\_\_\_\_\_ | Event Contact Name: |
| Address: | City: | State: | ZIP Code: |
| Email: | Home Phone: Cell Phone: |
|  |
| Type of Event: |
| Event Date(s):(1st choice) | Event Date(s):(2nd choice) | Anticipated attendance: |  |
| Event Time(s): including setup/cleanup time) from: \_\_ :\_\_\_ □am □pm to: \_\_ :\_\_\_ □am □pm **PARK CLOSES AT DUSK** |
| vendor information |
| Are you utilizing a vendor (i.e., caterer, bounce house, DJ, band, etc.) : □ yes □ no A Certificate of Insurance May be Required by Vendor  |
| Name of vendor(s): | Service provided by vendor(s): |
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| **Use/Event** | **Fees** |
| **St. Clair Park Rental:** | Commercial (for-profit) Organizations: **$50.00 per hour/$500 per day** | Nonprofit Organizations:RESTROOM OPENED; CLEAN UP **$30.00 per hour** (maintenance fee) | Sound System: SET UP START TO FINISH**$40.00 per hour** |

**PAYMENT INFORMATION** |
| All fees shall be paid in full upon reservation by cash, credit or check made payable to “City of Greensburg” in accordance with the attached fee schedule unless specified differently on the facility reservation policy. Reservations shall be accepted on a first-come/first-serve basis. (does not apply to Golf Outings) |
| **Payment Received:** □Credit Card □Cash or □Check No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| FACILITY USERS AGREEMENT |
| I, the undersigned agree to indemnify, defend and hold the City of Greensburg and its officers, employees and agents harmless and free from any liability of any nature, including, but not limited to, liability for damage or injury to any persons or property, costs and attorney’s fees, arising out of or in connection with the use of City recreational facilities regardless of whether the City was actively or passively negligent, either solely or contributory in connection with such liability. I certify that we have received and read the rules and regulations in the Public Reservation Policy and Fee Schedule for the use of this facility. I, the undersigned, do hereby agree that we will abide by the policies governing the use of this facility and will be responsible for any damages to the facility, furniture, or equipment caused by our occupancy of the premises.  |
| Signature(s) |
| FOR OFFICE USE ONLY:Recreation Staff□ Certificate of Insurance: Date: | Applicant Signature: Date: |