

Town of Florence Parks & Recreation Facility Use Application

P.O. Box 2670, 778 N. Main Street, Florence, AZ 85132 Ph.: (520) 868-7589/ Fax: (520) 868-7591
Office Hours: Monday- Friday, 8:00 a.m.-5:00 p.m. (excluding legal holidays)

Name:	Email:
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P.O. Box:	Address:
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Day Phone:	Evening Phone:	Organization Name:
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Date & Day of Use:	Hours of Use: (including setup and cleanup)	Number in Group:
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Complex being requested:	Facility being requested:
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Type of Use:	Room Set-Up: <input type="checkbox"/> Banquet <input type="checkbox"/> Classroom <input type="checkbox"/> Conference <input type="checkbox"/> Theater
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Rental Extras	Fee
Athletic Field Lights	<input type="checkbox"/> \$10 per hour
Additional Ball Field Prep	<input type="checkbox"/> \$25 each
Additional Football/Soccer Prep	<input type="checkbox"/> \$75 each
Parks Staff Labor	<input type="checkbox"/> \$15-\$50 per hour
Other Requests:	*All water slides are strictly prohibited in the Parks.*

TOTAL FEES \$

- 1) The area reserved shall be left in an orderly condition. All paper, rubbish, and other debris shall be deposited in the proper receptacles for this purpose.
- 2) No glass containers.
- 3) No motorized vehicles allowed in park facilities.
- 4) No spirituous liquor allowed. Beer permitted only with prior approval.
- 5) Park hours shall be observed except as noted on permit.
- 6) Both the applicant and organization agree to be financially responsible for all costs, personal injuries, and property damages arising from the facility use.
- 7) Inflatable usage must be pre-approved. Inflatable Company must provide a COI having the Town as Additionally Insured.

STAFF USE ONLY

Certificate of Insurance Required: <input type="checkbox"/> YES <input type="checkbox"/> WAIVED	BY WHOM:
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Insurance Company:	Name as Additional Insured:
	Date of Certificate:

The permit holder shall indemnify, defend and hold harmless the Town and it's Officials, employees, and agents from and against any and all liabilities, judgments, settlements, losses, costs, or charges (including attorneys fees) incurred by the Town and/or any of its officials, employees, or agents as a result of any claim, demand, action, or suit relating to any bodily injury (including death), loss of property, damage caused by, arising out of, related to, or associated with this agreement.

Applicant Signature & Personal Guarantee	Date	Town Employee Signature	Date
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