CITY of FAIRFIELD PARKS & RECREATION

APPLICANT CONTACT INFORMATION						
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				, ,		
Person responsible for rental/event:	FIRST		Birthdate: / /			
	FIKST	LAST		(MM/DAY/YR)		
Application on behalf of:						
NAME OF 0	GROUP, ORGANIZATION	OR BUSINESS IF APPLICABLE				
Address:						
STREET		CITY	STATE	ZIP		
Phone: ()	()	()			
HOME PHON	E	WORK PHONE	(CELL PHONE		
Email Address:						
Business Contact Person:						
	FIRST	LAST				
Phone: () HOME PHON	(() WORK PHONE	()			
HOME PHON	E	WORK PHONE	,	LELL PHONE		
Email Address:						
PLEASE ANSWER THE FOLLOWING QU						
Will alcohol be served?	□ Yes □ No	, ,		🗆 Yes 🛛 No		
Will alcohol be sold?	□ Yes □ No	If yes, please provide	name/number:			
		· · · ·				
Will food be served?	□ Yes □ No	Are you using an event		🗆 Yes 🗆 No		
Will food be sold?	🗆 Yes 🗆 No	If yes, please provide	name/number:			
Will there be an admission fee?	□ Yes □ No	Will there be amplified s	chund2	□ Yes □ No		
If yes, please describe:		(Laurel Creek ONLY)				
il yes, please describe.		sound:	i yes, what type	e or amplined		
Will you be renting porta potties?	□ Yes □ No					
		I				
RENTAL INFORMATION						

Rental Date(s):	Day(s) of Week:		Estimated Attendance:	
Rental Hours Including Set-Up and Clean-Up:	AM PM to	AM PM	Guest Arrival Time:	AM PM
Are you requesting a non-profit discount?	🗆 Yes 🛛 No			
Non-Profit Name:				
Non-Profit Tax ID:				
Please describe the type of activity or event:				

Allan Witt Park		Cordelia Community Park		Lee Bell Park	Lee Bell Park		Laurel Creek Park	
1741 West T	exas Street			ton Street	298	30 Gulf Drive		
□ Field 1	□ Field 5	🗆 Little Leag	gue 1	□ Softball			Little League 1	
∃ Field 2	□ Field 6	Little Leag	gue 2	Open Area			Little League 2	
Field 3	□ Field 7	□ Multipurp	ose Field				Soccer Field	
∃ Field 4	🛛 Open Area	D MP Ballfie	ld	Mankas			Softball	
Lights		□ MP Socce	r 1	2800 Owens Drive			Lights	
Start tim	e:	□ MP Socce	r 2	Open Area			Start time:	
				Woodcreek		Oc	to Inn Soccer Complex	
				1470 Astoria D	Drive		Soccer Field #	
				D Open Area	3			
ICNIC ARE	A REQUESTED							
llan Witt I		Cordelia Cor	nmunity Park	Gary Falati P	ark		Dover	
741 West T	exas Street	1300 Gold Hill		5100 Falati La			Hillview	
□ Area A	🗆 Area D	🗆 Area A	🗆 Area G	🛛 Area 1	🗆 Area 4		Mankas	
⊐ Area B	□ Pavilion	🗆 Area B	🗆 Area H	🛛 Area 2	□ Pavilion		Meadow Glen	
Area C		🗆 Area C	🗆 Area 1	🛛 Area 3			Ridgeview	
		🗆 Area D	🗆 Area 2		1	_	Tabor	
aurel Cree	k Park	🗆 Area E	🗆 Area 3	Rolling Hills Park			Tolenas	
896 Gulf Dr	ive	🗆 Area F		3520 Glenwoo	d Drive		Veteran's	
Area A	🗆 Area D			🗆 Area 1	🗆 Area 2		Vintage	
🛛 Area B	🗆 Area E				•		Woodcreek	
🛛 Area C	🗆 Area F							
n consideration nd its agents ctions or liab pplicant's inv	officers, employees, ility whatsoever direc	for use of the abo and volunteers, a tly or indirectly ar fies that applicant	ove facilities, applica gainst any and all cl ising out or resultin	ant hereby agrees t aims, demands, da g in any way from t	o defend, indemn mages, costs and e the occupancy or u	expense use of th	I hold harmless the City of Fa es, including attorney's fees, he facility by Applicant and/or on to the terms of this	
Date:				Signature:				
			• •			0	tion for any damage or theft icant or applicant's organizatio	
)ate:				Signature:				
Applicant has	read and understand	s the rules and reg	ulations as stated ir	n Parks & Recreatio	on Rental Conditior	ns & Inf	ormation packet and agrees t	

D	at	

Signature: _

 OFFICE USE ONLY

 Date Received:
 Received By:

 Approved:
 Denied:
 Date:
 Staff Signature:

 Payment Method:
 Receipt#:
 Rental Completion and Deposit Refund Date:

 Notes:
 Notes:
 Notes:
 Notes: