



Date Received    /   /     
 Rental Number           

## Field Use Application

Contact Information  
 Staci Hazelbaker (509) 625-6676  
 shazelbaker@spokanecity.org  
 808 W. Spokane Fall Blvd.  
 Spokane, WA 99201

**Applicant/USER GROUP/Contact Information      MUST BE FULLY COMPLETED TO BE**

<b>Name:</b>	<b>Phone Number:</b>	<b>Email:</b>
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**Address:**

<b>City:</b>	<b>State:</b>	<b>ZIP Code:</b>
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**User Group Affiliation**

<b>User Group Affiliation: Yes No (Please Circle)</b>	<b>User Group Name:</b>
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**User Group Address:**

<b>Phone:</b>	<b>E-mail:</b>	<b>Fax:</b>
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**User Group Details**

<b>(Select One in Each Area)</b>	<input type="checkbox"/> Recreation <input type="checkbox"/> Select/Premier <input type="checkbox"/> Youth <input type="checkbox"/> Adult	<input type="checkbox"/> SPRD <input type="checkbox"/> SPS <input type="checkbox"/> Other	
<input type="checkbox"/> \$50 Application Fee enclosed?	# of Competitive Players _____ # of Recreational Players _____	# Total of Players _____ # Field Requests _____	<input type="checkbox"/> League <input type="checkbox"/> Practice <input type="checkbox"/> Both

**Requested # of units By Season/Field Type/Quadrant**-Season dates are approximate-Subject to Change

Season	Soccer/Football/Other				Softball/ Baseball/Other				Total
	SE	SW	NE	NW	SE	SW	NE	NW	
<b>Spring Season (March 1<sup>st</sup>-May 31<sup>st</sup>)</b>									
<b>Summer Season (June 1<sup>st</sup>-August 31<sup>st</sup>)</b>									
<b>Fall Season (September 1<sup>st</sup>-October 31<sup>st</sup>)</b>									

**Statement of Liability**

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT I HAVE READ, UNDERSTAND AND AGREE TO ABIDE BY THE RULES AND REGULATIONS GOVERNING THE PROPOSED FIELD USE(S) AS STATED IN THE "ATHLETIC FIELD USE RENTAL GUIDE". I AGREE TO ABIDE BY THESE RULES, AND FURTHER CERTIFY THAT I AM ALSO FINANCIALLY RESPONSIBLE FOR ANY COST AND FEES THAT MAY BE INCURRED BY OR ON BEHALF OF THE EVENT TO THE CITY OF SPOKANE.  
 I AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS THE CITY OF SPOKANE, ITS DEPARTMENTS, EMPLOYEES, AGENTS, OFFICERS AND VOLUNTEERS FROM ANY AND ALL LIABILITY IN ANY AND ALL MATTERS CONCERNING THESE FIELD USES.

Payment for all rentals due within 30 days of invoice date. Invoices will be sent out monthly.

<b>I would like to receive information about upcoming events from the City of Spokane!</b>	<b>YES</b>	<b>NO</b>
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<b>Signature of applicant:</b>	<b>Date:</b>
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<b>Approval of Spokane Parks and Recreation:</b>	<b>Date:</b>
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**Field Name:**

**Days/Dates:**

**Time:**