



# Field Application

*Parks & Recreation: Get Out ~ Get Active ~ Let's Play*

Select One

**Baseball/Softball**

**Soccer**

Select One

**Millennium Park**

**Beirne Park**

**Lake School Park**

Team Name \_\_\_\_\_ Applicant Name \_\_\_\_\_

Address \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Purpose of Rental \_\_\_\_\_ Expected Attendance \_\_\_\_\_

	Date(s) Requested	Day of Week	Time
Option 1	_____	_____	_____
Option 2	_____	_____	_____
Option 3	_____	_____	_____

Field reservations are for 1 hour team practice. Please list 1st, 2<sup>nd</sup> & 3<sup>rd</sup> choices to be considered should your team be selected for reservation. Full team roster including all names, addresses and telephone numbers, proof of team insurance and fees are **due within 7 days of notification and acceptance of reservation**. Adult reserving the field **MUST** be a resident of the city and a parent, player or coach with the team. Checks should be made payable to "City of Creve Coeur".

### **Park Guidelines**

- Vehicles are not allowed beyond the parking lot of any park or field property for any reason including the loading or unloading of equipment. Violators will be subject to immediate cancelation of reservation.
- Fields may not be used when wet.
- Glass containers are prohibited in the park.
- Dogs must be kept on a leash. Owners must follow the Pooper Scooper Ordinance.
- Golf is not permitted in the park.
- The park closes at dusk.
- Properly dispose of trash cans in receptacles.

By signing below, I have read and agree (together with any minor named herein) to abide by the Policies & Guidelines of the Creve Coeur Parks and Recreation Department, including COVID-19 Guidelines. I understand that Creve Coeur cannot provide any assurance that we will not be exposed to COVID-19 and we assume all risks related thereto. In addition, intending to be legally bound hereby for myself, my heirs, executors and administrators, and any named minor, I agree to indemnify and hold the City harmless from, and waive and release, any and all claims against the City, its officials, representatives, employees, successors and assigns, for any and all illnesses, injuries, death, and/or damages occurring during or resulting from my event whether occurring to or caused by me (or any named minor). We will provide accurate health information regarding COVID-19 symptoms and exposure prior to each entry into the facility.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved by Parks & Recreation Representative

\_\_\_\_\_  
Date