



ATHLETIC FIELD RENTAL APPLICATION

ORGANIZATION INFORMATION - Note: Player/team information below should indicate the number of players that will utilize the field per that requested season, not total number of players in organization. Roster will be verified.

Organization:	Today's Date:	
Scheduling Contact:	UBI:	
E-Mail:	Home Phone #:	
Mailing Address:	Work Phone #:	Ext:
City: State:	Cell Phone#:	
Zip:		
#of team in your Org:	Total # of players in Org:	
Name of Supervisor on Site:	# of players living in Issaquah School District	

Organization Type:	Activity
<input type="checkbox"/> Issaquah Youth Organization <input type="checkbox"/> Issaquah Adult Organization <input type="checkbox"/> Other Youth Organization <input type="checkbox"/> Other Adult Organization <input type="checkbox"/> Commercial Group <input type="checkbox"/> School District <input type="checkbox"/> Other <input type="checkbox"/> Non-Profit Group ** (indicate which type of group above) ** Organizations claiming non-profit status must provide Org's UBI #.	<input type="checkbox"/> Practices & League Games* <input type="checkbox"/> League Games Only* <input type="checkbox"/> Practices Only Leagues must provide team rosters with names and addresses included (to be verified) and proof of insurance, both to be submitted with application. *Games will require field preparation at the appropriate charge.

SPORT: Youth or Adult <i>(circle one)</i> <input type="checkbox"/> Baseball Age _____ Base Length _____ Mound Distance _____ <input type="checkbox"/> Softball Age _____ Base Length _____ Mound Distance _____	SOCCER/LACROSSE/FOOTBALL, OTHER: Youth/Adult <i>(circle one)</i> <input type="checkbox"/> Soccer <input type="checkbox"/> Lacrosse Boys <input type="checkbox"/> Lacrosse Girls <input type="checkbox"/> Football <input type="checkbox"/> Other _____
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Requested Date(s):	Time(s)	Facility Type:

League Practice Start Date(s):	Game Start/ End Dates

Use of City of Issaquah fields is governed by specific rental regulations, guidelines and fees outlined in our current year "Athletic Field Rental Guide". Application process is outlined that same guide. Applicant/Organization fully understands that use of City of Issaquah fields/parks is intended solely for the applicant on file and as such cannot be transferred or sublet to any other entity. Failure to comply will result in loss of future field use.

Fair Play Act

The City of Issaquah complies with the State of Washington's "Fair Play in Community Sports Act" (Chapter 467, 2009 Laws, effective date July 26, 2009) that prohibits discrimination against any person in a community athletics program on the basis of sex. Please send any questions or comments to: Ross Hoover at the City of Issaquah, P.O. Box 1307, Issaquah, WA 98027 or JaredB@issaquahwa.gov or 425-837-3324.

Indemnification/Hold Harmless

APPLICANT/ORGANIZATION shall indemnify, defend and hold the CITY and its agents, employees, and/or officers, harmless from and shall process and defend at its own expense any and all claims, demands, suits at law or equity, actions, penalties, loss, damages, or costs, of whatsoever kind or nature, brought against the CITY arising out of, or in connection with, or incident to, the execution of this rental application and/or the APPLICANT/ORGANIZATION'S performance or failure to perform any aspect of this Agreement; provided, however, that if such claims are caused by or result from the concurrent negligence of the CITY, its agents, employees, and/or officers, this indemnity provision shall be valid and enforceable only to the extent of the negligence of the APPLICANT/ORGANIZATION; and provided further, that nothing herein shall require the APPLICANT/ORGANIZATION to hold harmless or defend the CITY, its agents, employees, and/or officers for damages or loss caused by the City's sole negligence. **The UNDERSIGNED has read and on behalf of the Licensee agrees to be bound by this permit/license and the Terms and Conditions contained herein and attached hereto by means of the Athletic Field Rental Guide, and hereby warrants and represents that he/she executed this Permit/License request on behalf of the Licensee and has sufficient power, authority and capacity to bind the Licensee with his/her signature.**

AUTHORIZED REPRESENTATIVE _____

DATE _____