



Sport Fields Facility Application

Thank you for requesting a City of Lakewood facility. The City of Lakewood wishes to encourage use of City facilities by the community as long as the use is of lawful purpose and does not interfere with the conduct of the City's programs or the primary purpose for which the facilities are intended. Community use of facilities is subject to the terms of City of Lakewood Policy and Procedures and the current schedule of user fees. Permission to use a particular facility may be denied based upon availability or City initiatives. No person or group shall be denied the full enjoyment of the facilities because of race, creed, color, gender, origin, or any other protected class under applicable law.

NAME OF ORGANIZATION _____

NAME OF PERSON IN CHARGE _____ Returning Customer? Yes No

MAILING ADDRESS _____
City State Zip

BEST CONTACT PHONE: _____ Cell Phone: _____

Email Address (Required): _____
 Please send me emails about upcoming events at Lakewood City Parks

NATURE AND PURPOSE OF ACTIVITY _____
 Tournament League

SPECIFIC FACILITY REQUESTED Fort Steilacoom Park Other _____

NUMBER OF TEAMS/PARTICIPANTS _____ Total Expected Number of People: _____
*If Tournament, please provide an additional document providing a Zip Code for each Team

Baseball Field(s) *Please note the base and pitch length must remain the same for the day

Baseball Fields	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Base Length	<input type="checkbox"/> 60 <input type="checkbox"/> 70 <input type="checkbox"/> 80 <input type="checkbox"/> 90	<input type="checkbox"/> 60 <input type="checkbox"/> 70 <input type="checkbox"/> 80 <input type="checkbox"/> 90	<input type="checkbox"/> 60 <input type="checkbox"/> 70 <input type="checkbox"/> 80 <input type="checkbox"/> 90	<input type="checkbox"/> 60 <input type="checkbox"/> 70 <input type="checkbox"/> 80 <input type="checkbox"/> 90
Pitch	<input type="checkbox"/> 46 <input type="checkbox"/> 50 <input type="checkbox"/> 54 <input type="checkbox"/> 60	<input type="checkbox"/> 46 <input type="checkbox"/> 50 <input type="checkbox"/> 54 <input type="checkbox"/> 60	<input type="checkbox"/> 46 <input type="checkbox"/> 50 <input type="checkbox"/> 54 <input type="checkbox"/> 60	<input type="checkbox"/> 46 <input type="checkbox"/> 50 <input type="checkbox"/> 54 <input type="checkbox"/> 60
Mound	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional Prep?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Anticipated Prep Time?				

Using field(s) above for (sport): _____

Soccer Fields

Soccer Fields	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F
210 x 330 Size	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Initial Prep?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Custom Size						

Using field(s) above for (sport): _____

DATES TO BE USED _____ *Please attach schedule

TIMES OF DAY/EVENING: FROM (including set-up) _____ AM/PM TO (including take-down) _____ AM/PM

WILL ADMISSION BE CHARGED? Yes No ADDITIONAL NEEDS? _____

FACILITY RENTAL FEES will be determined by the current established rental rates at time of play. Payment of charges shown on the application form is to be made to City of Lakewood. Charges may be added to cover the cost of additional staff or services not covered in the original agreement or for damages or agreement violations.

YOUTH SPORT RENTER REQUIREMENTS

Users of athletic fields and facilities for youth sports shall comply with RCW 28A 600 190 and RCW 28A 600 195 regarding youth sports concussion, head injuries and sudden cardiac arrest. A compliance form must be signed and returned annually or prior to event (s).

All users of athletic fields and facilities shall comply with City of Lakewood’s Gender Equality Policy, pursuant to RCW 49.60.550. Demographic data will be required upon completion of season or event.

AGREEMENT, RELEASE AND INDEMNIFICATION

The person or organization entering into a use agreement with the City of Lakewood for the use of City of Lakewood facilities or equipment described above (collectively “the Facilities”) certifies that the information given in this application is current and correct. The undersigned further states that he/she has the authority to make this application for the Applicant and agrees that the Applicant will observe all rules and regulations. The Applicant further agrees to reimburse the City of Lakewood for any damages arising from the Applicant’s use before, during, or after of said Facilities. Any accident involving injury to participants or damages to the Facilities occurring during the use of the Facilities will be reported to City of Lakewood immediately.

FURTHERMORE, the applicant agrees as follows:

____ **Initial** I am aware of and expressly assume all of the various risks of serious injury and/or death associated with or arising out of the use of the Facilities.

____ **Initial** In consideration for granting this request, and being fully aware of all of the risks, I hereby RELEASE the City of Lakewood and its officials, employees, volunteers and agents (“the Released Parties”), and AGREE TO WAIVE ANY RIGHT OF RECOVERY THAT I AND/OR THE ORGANIZATION, AS APPLICABLE, MAY HAVE, including the right to bring a legal claim, cause of action, or lawsuit for any bodily injury, death or other harmful consequences in any way arising out of use of the Facilities. I understand that this release extends to all claims of any kind and every nature, known, unknown, suspected or unsuspected, in any way arising out of or related to use of the Facilities.

____ **Initial** I agree to defend, indemnify and hold harmless the Released Parties from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of the use of the Facilities or from any activity, work or thing done, permitted, or suffered by Applicant in or about the Facilities, except only such injury or damage as shall have been occasioned by the sole negligence of the Released Parties.

INSURANCE

The Applicant is required to procure and maintain for the duration of the use or rental period insurance against claims for injuries to persons or damage to property which may arise from or occur in connection with the use of the Facilities and the activities of the Applicant and his or her guests, representatives, volunteers and employees.

Accordingly, the Applicant shall provide proof of general liability insurance, with minimum limits of \$1,000,000 per occurrence and \$2,000,000 aggregate, and name City of Lakewood as an additional insured by using ISO endorsement CG 20 11 on said policy. The insurance policy shall contain, or be endorsed to reflect, that the Applicant’s insurance coverage shall be primary insurance as respects the City of Lakewood. Any insurance, self-insurance, or self-insured pool coverage maintained by the City of Lakewood shall be excess of the applicant’s insurance and shall not contribute with it. For athletic events, the General Liability insurance shall include coverage for participant liability with limits of not less than \$1,000,000 per occurrence.

I have read the rules and regulations above and on the reverse side of this form and agree to the conditions and charges as established on my own behalf and on behalf of the Organization as applicable:

Printed Name: _____ Signature: _____ Date: _____

*Your application is not finalized until payment is received and a permit is issued.
Once the application is returned City Parks Staff will contact you for payment information.*

Return completed applications and supporting documents (via mail or E-mail) to:

City of Lakewood
Parks, Recreation and Community Services
6000 Main Street SW, Lakewood, WA 98499

City of Lakewood Phone: 253-983-7887
E-Mail: nyork@cityoflakewood.us