



**RECREATIONAL FACILITY USE REQUEST**  
501 Lamb Street, PO Box 6, Milton-Freewater, OR 97862

Submit this form to the Public Works Department no later than five days prior to desired facility use.

**Date:** \_\_\_\_\_

**CONTACT INFORMATION:**

**Organization:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Daytime Phone:** \_\_\_\_\_

\_\_\_\_\_

**Evening Phone** \_\_\_\_\_

**FACILITY INFORMATION:** (please attach schedules if they are available)

**Requested Facility (s)** \_\_\_\_\_

**Frequency (day of week, one time, etc)** \_\_\_\_\_ **(Time)** \_\_\_\_\_ **to** \_\_\_\_\_

**Starting** \_\_\_\_\_  
(day/month/year)

**Ending** \_\_\_\_\_  
(day/month/year)

1. It is agreed that the party or parties using the facilities will exercise every care in protecting City property and in the event that damage results from improper supervision, a fair adjustment may be made.
2. All authorized use of City property requires the user to leave the grounds or facilities in a condition equal to or better than when authorized for use.
3. All litter, glass, etc resulting from authorized usage will be removed at the user's expense immediately following the activity.
4. Any violation or disregard of City policy will result in automatic forfeiture of future use requests.
5. The using agency and/or individual must show proof of liability insurance for the requested activity.
6. All authorized users must comply with all city rules, regulations and charter.
7. The user agrees to obtain, at its own expense, public liability insurance in the sum of not less than (\$500,000) and property damage insurance in the amount of not less than (\$500,000). **The user will provide the City with proof of such insurance at the time of entering into this agreement, and will ensure that the City of Milton-Freewater is named as an additional insured.**
8. Be it further understood that the City of Milton-Freewater assumes absolutely no financial responsibility for any injury or accident, lawsuit, etc that may occur during the user's tenure of grounds or facilities.
9. Equipment shall be removed from City property within 7-10 calendar days of the last day of use requested as noted above.

**I hereby have read the above rules and regulations and take full responsibility.**

**Organization Representative:** \_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

**Address:** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Special Equipment/Materials Needed:** \_\_\_\_\_

**For Office Use Only:**

**Comments/Conditions by Management:** \_\_\_\_\_

\_\_\_\_\_

**Approved / Denied** (circle one) **By:** \_\_\_\_\_ **Date:** \_\_\_\_\_