

City of El Lago



McNair Ball Field Seasonal Contract

Team Name _____ Contact Phone # _____

Contact Name _____ Contact Address _____

Contact Email _____

SEASON Winter (Jan-Feb) Spring (Mar-June) Fall (July-Dec)
(Circle One)

DAY(S) RESERVED	Monday	Tuesday	Wednesday	Thursday	Friday
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Weekends not available for reservations

TIME RESERVED ___:___ to ___:___ ___:___ to ___:___

AGREEMENT

By signing below, I agree as a representative of the group listed above to hold the City of El Lago blameless for any and all claims of injuries and/or damages, personal or otherwise, that may arise out of the use of the property without regard to whether the injuries and/or damage is brought about or caused my negligence, whether on the part of the City of El Lago or the team signing the agreement.

I agree not to remove any property belonging to the City of El Lago from the premises, and I agree to police the area after practice for trash. If any damage is caused to City property beyond the scope of ordinary wear and tear, I agree to be responsible for the cost of repairing said damages.

I agree that I have been given a copy of the McNair Ball Field Rules and have read and agree to the terms and conditions listed within.

Signature of Team Representative

Date

Signature of City Representative

Date

Office Use Only
Time & Date Received: _____ Calendar: _____