



John O. Linde Community Park Rental Application

Organization Name _____

Contact Name _____

Day Phone _____ Evening Phone _____

Email _____

Mailing Address _____

Alternate Contact _____

Day Phone _____ Evening Phone _____

Email _____

Requested Facility: *Circle all that apply* (Multipurpose) (Soccer) (Baseball) (Softball) (non-field space)

Purpose for Use _____

Dates Requested: *Please attach Dates if a whole season of practices and or multiple games* _____

Will you need use of: Concession Stand? Yes / No Electronic Scoreboard? Yes / No

Dates Requested _____

Special Notes _____

Field Lining

If you have specific requests for lining of the fields for games, please submit dimensions and an outline with your rental application so it may be reviewed and approved by the Parks Superintendent.

Insurance

Please attach a copy of your General Liability insurance with no limits, no less than \$1,000,000 each occurrence, \$1,000,000 general aggregate. For athletic events General Liability insurance shall include coverage for participant liability with limits of not less than \$1,000,000 per occurrence. **San Juan Island Park and Recreation District** must be named as additionally insured. The insurance policy shall contain or be endorsed to contain that the User Group's insurance coverage shall be primary insurance as respect to the District. This is due no less than 1 week prior to facility use date.

Main Office - 580 Guard St
Parks Office – 565 Carter Ave

(360)378-4953
(360)378-0337

Monday-Friday 10 am-2pm
Call for hours



Deposits & Fees

Deposits & fees are due no less than 3 weeks (business days) prior to facility use date. If concession stand will be in use, Island Rec will need copies of the permit for food service as well as food handler's cards for anyone running the stand. Please submit your paperwork & any questions to Tracy Roberson; tracy@islandrec.org

Please make separate checks out to Island Rec for the Deposit & Facility Use Fee

Indemnification/Hold Harmless

User shall defend, indemnify and hold harmless San Juan Island Park and Recreation District, its officers, officials, employees and volunteers 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 Premises or from any activity, work or thing done, permitted, or suffered by User in or about the Premises, except only such injury or damage as shall have been occasioned by the sole negligence of San Juan Island Park and Recreation District.

Signature agreeing to above and the policies and procedures outlined in the Rental Packet

Signature _____ Date: _____

For Office Use (please initial)

Approved _____ Denied _____ Reason _____

Insurance _____ Date Received _____

Facility Deposit _____ Date Received/Returned ____/____ Facility Fee _____ Date Received _____

Concession Deposit _____ Date Received/Returned ____/____ Concession Fee _____ Date Received _____

Health Department Paperwork _____ Date Received _____

Key Checkout _____ Returned _____

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