



**ANDERSON TOWNSHIP PARK DISTRICT
2012 FIELD REQUEST FORM
FOR LEAGUE USE AND TRYOUTS**

Tournaments and Camps requests should be placed
on a Special Event Request Form

Multiple season users must submit separate requests for each season.

This request is for: Youth _____ Adult _____ Spring Season _____ Fall Season _____
Please complete one request form per season:

Date Submitted _____

I. Name of Requesting Organization _____

Name of President for 2012 _____

Address _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Email Address _____

Person who should receive the invoice (if different than above)

Name _____

Address _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Email Address _____

Name of Scheduler or Rescheduler (if different than above)

Name _____

Address _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Email Address _____

Other special instructions: _____

Anticipated # of Players _____ **# of Coaches** _____ **of Spectators** _____ **# of Teams** _____

Age Range of Players _____ **Total # of Anderson Township Resident Players & Coaches** _____
(Youngest to Oldest)

Dates requesting:

First practice date is _____ Last practice date is _____

First game date is _____ Last game date is _____

My organization needs to be informed of our field allocation by the following date: _____

II. PLACE/DATE/TIME/FIELD REQUESTS

A) Do you authorize an individual or umbrella organization to request and allocate fields for your organization?
i.e. Soccer Council etc. Yes _____ No _____

If yes please indicate organization and individual _____

If you have authorized another individual/organization to request fields on behalf of your organization, you do not need to complete the rest of this section.

B) Organizations with multiple facility requests please read the following:

Baseball and Softball organizations: please skip the remainder of this section (Section II) and complete the attached supplemental form. AABC teams should submit schedules.

Football, Lacrosse, Rugby, and Soccer organizations: due to the variety of potential field sizes, each organization should indicate days, times needed, and the number of fields with sizes. Please provide any additional information on the back of this form. The ATPD will decide the appropriate field configuration at each facility according to need.

C) Location(s) Requested: (Please circle)

Beech Acres Park Clear Creek Park Julifs Park Kellogg Park
Laverly Park Riverside Park Veterans Park

Days & Times needed: Please enter a **beginning** and **ending** time.

Monday _____ Beginning Time _____ Friday _____ Beginning Time _____
Ending Time _____ Ending Time _____

Tuesday _____ Beginning Time _____ Saturday _____ Beginning Time _____
Ending Time _____ Ending Time _____

Wednesday _____ Beginning Time _____ Sunday _____ Beginning Time _____
Ending Time _____ Ending Time _____

Thursday _____ Beginning Time _____
Ending Time _____

Number of fields by approximate size requested:

<u>SOCCER</u>	<u>FOOTBALL, RUGBY & LACROSSE</u>	<u>BALL DIAMONDS</u>
Dribblers/Trappers (30x20 Yds. 2x) How many?	Football Size: How many?	90' Base Line Mound? Yes No How many?
Shooters/Passers (40x30 Yds.) - (90x120 Ft.) How many?	Rugby Size: How many?	80' Base Line How many?
Comp 6v6, Flyers/Wings (60x40 Yds.) - (120x80 ft.) How many?	Lacrosse Girls - How many fields? Boys – How many fields?	70' Base Line How many?
Comp 8v8 (50x80 Yds.) - (180x240 Ft.) How many?	Special Notes:	60' Base Line How many?
Full/11v11 (70x110 Yds.) – (210x330 Ft.) How many?		Misc.

III. LIABILITY INSURANCE – Proof of Insurance is required.

The organization agrees to forward a Certificate of Insurance with The Anderson Township Park District named as an additional insured to: Anderson Township Park District, 8249 Clough Pike, Cincinnati, Ohio 45244 or fax to 388-2494. Field permits will not be issued until all forms and certificates are received.

Name of liability insurance carrier agency _____

Phone _____ Agent's Name _____

Limits of liability _____

IV PERMITS

The ATPD reserves the right to alter field permits to accommodate field conditions and other events.

V ACKNOWLEDGMENTS AND RELEASE OF LIABILITY

The Anderson Township Park District reserves the right to require a surety bond and deposit for any event.

Release, hold harmless, and indemnification agreement: Renter by and through the undersigned representative hereby covenants and agrees that Renter releases, holds harmless, and indemnifies Anderson Township Park District, Anderson Foundation for Parks and Recreation, Anderson Township, Beech Acres Parenting Center, and its and their respective boards, trustees, employees, agents, attorneys and assignees from any and all loss, claim, judgment, damage, or any amount owed by reason of any further claim, demand and/or action at law or in equity that may at any time hereinafter be brought or made against any of them with the intent, or for the purpose of establishing or enforcing any further claim related to, or arising from or on account of injuries, property damage or in any way related to the rental of Anderson Township Park District facilities by this Renter. This indemnification clause specifically includes the payment of attorney's fees and/or legal expenses necessarily incurred to defend any and all claims made. Renter hereby acknowledges that no member of the "renter" organization is acting as an agent, representative, employee or contractor of the Anderson Township Park District, its agents or representatives.

General Requirements and Conditions

Organizations holding permits for any field(s) that follows use by an area school team, need to be flexible about games that may run longer than anticipated.

The ATPD reserves the right to publish photos and video taken on Anderson Township Park District property.

For practice fields: goals and lines are not available until your league's first game date. Official change over from baseball to soccer at Juilfs, Veterans and Riverside Parks is after Labor Day.

Anderson Township Park District field status Hotline number is 513-357-6629. Please call to check on your field status. When the hotline indicates a field is closed, fields are not to be played on under any circumstances. If a team or group plays or practices on a closed field, they will be subject to a \$150.00 fine, plus damages and may be subject to a one year suspension of eligibility for use of any ATPD field even if coaches and/or officials are not present.

If an emergency would arise please call **911**. If you need a Deputy Sheriff to respond to your location you may call the Hamilton County Police Dispatcher at 513-825-2280 and describe the nature of your request. All other problems/concerns please contact the Operations on-call phone, 513-266-3487.

Littering is not acceptable. Deputy Sheriff's may cite violators and organizations can be held accountable for fields found in a littered condition. Fields will be checked at the end of each day. The last team scheduled on that field will inherit the responsibility for trash removal.

Legal compliance: Renter agrees to follow and adhere to all local, state, and federal laws applicable to the rental of the ATPD facilities and the activities emanating there from including but not limited to health, worker's compensation, discrimination, licensing laws, ATPD rules and regulations and ATPD field policies.

Notification of Participants: The Renter agrees to notify and inform all participants of the organization of the aforementioned information and responsibilities.

Authority to Bind Organization: The Representative confirms and warrants that by executing this Agreement and Application on behalf of the Renter, he/she has full authority to so act on behalf of the Renter and to bind the Renter to the terms of this agreement. The term "Renter" includes the Organization listed above, its members, agents, assigns and those persons assisting the Organization in its efforts and performing its duties hereunder.

Organization Name – "Renter" _____ Date _____

Signature of Applicant Representative _____ Please Print Name _____

This form must be signed for this request to be considered.

For Office Use Only:

Date Request Received _____

Date Proof of Insurance Received _____

Date Request Approved _____

Notified of Approval Date _____

How was notification communicated by?
Letter or Voice/Message