



ATHLETIC FIELD USE APPLICATION

Applicant's Name: _____

Name of Organization: _____ # of teams: _____ Age Group: _____

If representing an organization/agency, position held: _____

Address: _____ City: _____ Zip: _____

Phone (day): _____ Cell: _____ Email: _____

FIELDS REQUESTED

FIELD	DATE	DAY	START	FINISH	RATE	TOTAL
Sub Total:						
Deposit:						
Remaining:						

Indemnification:

To the fullest extent permitted by law, the Permittee shall indemnify and hold harmless the City, its officers, agents and employees from and against claims, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from performance of this agreement, that results in any claim for damage whatsoever, including without limitation, any bodily injury, sickness, disease, death, or any injury to or destruction of tangible or intangible property, including any loss of use resulting therefrom that is caused in whole or in part by Permittee or anyone directly or indirectly employed by Permittee, or anyone for whose acts any of them may be liable. This section shall not require Permittee to indemnify or hold harmless the City for any losses, claims, damages, and expenses arising out of or resulting from the sole negligence of the City.

In signing this application, I acknowledge that I have read and agree to the requirements set forth in the appropriate Rental Use Regulations and the Indemnification.

Applicant's Signature: _____ Date: _____

(Person responsible for facility / field use)

Return to: Athletics Office, 3140 N Street, Suite 300, Lincoln, NE 68510 or athletics@lincoln.ne.gov

LP & R Athletics Supervisor: _____ Date: _____

Deposit _____ Payment Type _____ Date _____ Staff _____	Balance _____ Payment Type _____ Date _____ Staff _____
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