# All Park Reservation Form - City of West Richland

- Check out keys at the City Administration Building on the business day closest to your event.
- Person making reservation must be onsite for duration of event
- Non residents reserving parks are required to pay user fees. Please see attached menu of fees.
- All keys must be returned the first business day after your event.
- Office hours are Monday - Friday, 8 a.m. – 5 p.m.

**No vehicles are allowed on the grass in City parks.**

Person Making Application _____ Date _____

Contact Person (if different) _____

Address/City/State/Zip _____

Day Phone _____ Evening Phone _____ e-mail _____

Group _____

Date of Event _____ Time/Hours (including setup & cleanup) _____

Event Description _____

Number of People at Activity _____

**Facility Requested:**

- ☐ Flat Top, upper lawn
- ☐ Flat Top, lower lawn
- ☐ Pavilion at Flat Top Park
- ☐ Kitchen at Flat Top Park
- ☐ Glen Memorial
- ☐ Coyote Park
- ☐ South Highlands Park
- ☐ Enterprise Park
- ☐ Paradise Park
- ☐ Bombing Range Sports Complex
- ☐ Little League Club House

Field numbers _____

☐ Other _____

Permit may be Required

| | | |
|---|---|---|
| Has a liquor permit been requested? | Yes | No |
| Is anyone selling concessions, equipment, novelties, etc? | Yes | No |
| Is admission being charged or donations accepted? | Yes | No |
| Will there be any type of music or live entertainment? | Yes | No |
| Will you need to drive on Park lawns? | Yes | No |

I have read and agree to follow the park rules and regulations and agree to abide by them as well as all laws, codes and regulations. I agree to indemnify and hold harmless the City of West Richland and any officers, employees, representatives, directors of agents or either from and against all liability, claims, suits, damages, levies, costs, losses and fees, including attorney fees, arising out of or related to my activities at the park.

_____ _____

**Signature of Responsible Party** **Date** **City of West Richland Representative** **Date**

**Office Use Only:**

| | | | | | |
|---|---|---|---|---|---|
| Reservation fee | $ _____ | Special use permit req.: | _____ | Key Out: Date: | _____ |
| Use fee: | $_____ | Receipt # | _____ | Key No. | _____ |
| Key Deposit: | $_____ | W/O Prepared: | _____ | Key In: Date: | _____ |
| Utility Fee: | $_____ | Logged in Calendar: | _____ | Inspection OK: | _____ |
| Receipt # | _____ | Insurance req. | _____ | Refund req. | $ _____ |
| | | Insurance supplied | _____ | Refund amount | $ _____ |

Rev, May 28, 2007