



CONTACT INFORMATION

Name: _____ Phone Number: _____
 Address: _____
 City: _____ State: _____ Zip: _____

REQUESTED RESERVATION INFORMATION

- Please Note:
- Currently all regular reservations are offered to the public free of charge but are limited to 2 reservations per week.
 - Reservations are accepted up to 6 months in advance.
 - At this time, we are not accepting facility reservations for profitable events such as sports leagues and tournaments.
 - Please make all requests 2 weeks prior to reservations.
 - Please anticipate permit fees to be added in the future as improvements are made in our parks.

Dates Requested: _____

Time of Reservation: _____ - _____ *at this time, all reservations are limited to 2 hours

- Shelter Reservation:
- Edgerton Lake North Shelter
 - Edgerton Lake Middle Shelter
 - Edgerton Lake South Shelter
 - Martin Creek Park Shelter
 - Manor Park Shelter

- Athletic Field Reservation:
- Ballfield #1
 - Lights Required? Yes (\$20/hour charge) No
 - Soccer Field
- *Ballfield #2 is currently only available on a first come, first serve basis.

- Other Reservations:
- Horse Shoe Pit
 - Lights required? Yes (\$20/hour charge) No
 - Off-Leash Dog Park

LIABILITY RELEASE

I, as an outside entity representing minor participants as well as adults, agree to release the City of Edgerton, its officers, employees and volunteers, from all liability for accidents, injuries, loss of and/or damage to my/our people or property that may arise out of my/our participation in/and our presence at the above activity(s). I/we understand the risks and possible dangers of participating in these activity(s). Also, I/we authorize the City of Edgerton to use at its discretion any photograph(s) (black/white or color) taken of the participant while participating in the program and waive any and all claims that the participant or the undersigned or their heirs, executors, administrator, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof. I have entered into this agreement of my own free will.

I have read and I understand and agree to abide by the policies and fees for the type of facility I am applying to rent and I, or a representative on my behalf will be present at the facility during its use. I further realize the ramifications of failure to abide by the policies set forth in this document. I understand that submittal of this form does not guarantee approval of my application.

Signature: _____ Date: _____

Payment due: \$ _____ Payment Method: Credit Card Check Cash

OFFICE USE ONLY

- Request Approved Request Not Approved Copy to Applicant Copy to File

Signature: _____ Date: _____

Details: _____
