West Geauga Community Joint Recreation District PO Box 384 * Chesterland, OH * 44026

ATHLETIC FIELD RESERVATION APPLICATION (Soccer, Baseball, Volleyball, Lacrosse)

				of Application:	·
Applicant's Name:					
Address:					
Phone:					
Organization (If Applicab	le):				
Organization (If Applicab FACILITY APPLIED FOR:	Baseball	Soccer	Volleyball	Lacrosse	
Intended Use:					
Date(s) of Intended Use:					
Time(s) of Use:					
	t applicant will ind nunity Joint Recrea	lemnify and	hold harmless tl	he District Trust	d and agrees to abide by tees, employees and agents which is caused by the use
-	nd Regulations	. A fine	•	ill be impose	nd spectators aware ed in the event that
•ATHLETIC ORGANIZATION PRIOR TO THE START OF TI •ALL SCHEDULE REVISIONS	HE SEASON.				CE ON DISTRICT FACILITIES ER.
Application fees as determ WGCJRD reserves the right closed.					
Name of Person Responsi	ble for Clean-up _				
Applicant's Signature:					
Mail completed application	n to: Linda Palchio	ck, 11375 W	illow Hill, Chest	erland, OH 440	26, Phone: (440) 729-7062.
WEST GEAUGA COMMONS You have been granted usand	S ATHLETIC FIELD se of in accordance	PERMIT (fo	r WGCJRD use): conditions as sig	on_ gned by applica	_ between the hours of nt above.
Signature		Title			Date