



Application for Use: Sports Fields
City of Pleasanton Library and Recreation Department
Mailing Address P.O. Box 520, Pleasanton, CA 94566 Phone: (925) 931-3437

CONTACT INFO

Applicant Name: _____ Organization Name: _____
Applicant Phone: _____ Organization Phone: _____
Applicant Email: _____ Organization Website: _____
Applicant Address: _____ Organization Address: _____

FIELD USE DETAILS

Estimated Number of Participants: _____ Lights (if applicable): Yes No
Brief Explanation of Sport/Activity and Equipment List (i.e., games, practices, clinics, vendors, tournaments, tents, etc.):

The actual date, time, and location of use may vary from the requests. Please include set-up and clean-up time. Include an attachment if necessary.

Date/s: _____

Time/s: _____

Location/s:

Amador Community Park

Bernal Community Park

Centennial Park

Creekside

Ken Mercer Sports Park

Muirwood

Tennis & Community Park

Upper Bernal

Val Vista

Area (i.e., LL9, VV2, Stadium)

LIABILITY WAIVER

I certify that the information provided herein is correct. If I am renting the facility on behalf of an organization, I certify that I am authorized to execute this agreement on behalf of the organization.

I certify that I have read the Rules and Regulations (“Rules”) at www.pleasantonsports.org pertaining to the use of the City’s facility. I agree to comply with the Rules and to be responsible for informing those using the facilities of the Rules. I agree (and/or the organization that is seeking to use the facility agrees) to be responsible for any damage sustained to the facility as a result of my use (or my organization’s use) of the facility.

I further agree (and/or the organization that is seeking to use the facility agrees) to release, hold harmless, defend, and indemnify the City of Pleasanton from any claim, damages, injuries or death, costs, or cause of action which I have (or may have in the future) related to use of the facility. I have provided the City with a Certificate of Liability Insurance with a minimum general liability limit of \$2,000,000 per occurrence and an Additional Insured Endorsement naming the following as additional insured: the City of Pleasanton, its officers, employees, agents, and volunteers (and where the facility is owned by the District also naming the Pleasanton Unified School District, its officers, employees, agents, and volunteers.)

Signature of Applicant _____ Date: _____

FOR OFFICE USE ONLY

Recreation: Approved: _____ Not Approved: _____ **Parks:** Approved: _____ Not Approved: _____

Insurance: Yes No Requires Business License: Yes No

Permit #	
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