

FELDMAN RECREATION CENTER
 8800 W. KATHY LANE
 NILES, IL 60714
 (847) 297-3000
www.GMPD.org



DEE PARK RECREATION CENTER
 9229 W. EMERSON
 DES PLAINES, IL 60016
 (847) 297-3026

FIELD / PARK USE PERMIT

Please keep a copy of this permit during your rental period.

CONTACT PERSON: _____

ORGANIZATION: _____

ADDRESS: _____

HOME PHONE: _____

CITY: _____ STATE: _____

WORK PHONE: _____

ZIP: _____

CELL PHONE: _____

E-MAIL: _____

FAX: _____

FACILITY REQUESTED:				
Baseball Field:	Diamond #1	Diamond #2	Diamond #3	
Sand Volleyball:	Court #1 (East)	Court #2 (West)	Soccer Field	Tennis Courts 1 2
Cricket Pitch	Horseshoe Pits	Basketball Court	Shuffle Board	Water Spray Park

TYPE OF USE: SINGLE EVENT SEASONAL

DATES OF USE: ____/____/____ TO ____/____/____

DAY OF USE: **TIME OF USE:**

Su M Tu W Th F Sa _____ Am/Pm to _____ Am/Pm

Su M Tu W Th F Sa _____ Am/Pm to _____ Am/Pm

Su M Tu W Th F Sa _____ Am/Pm to _____ Am/Pm

Su M Tu W Th F Sa _____ Am/Pm to _____ Am/Pm

<p>BASEBALL FIELD SET-UP REQUEST (Add \$30 - Resident/\$50 Non-Resident)</p> <p style="text-align: right;"><input type="checkbox"/> YES</p> <p style="text-align: right;"><input type="checkbox"/> NO</p>

I, the undersigned, hereby certify that I am/We are the appointed representatives of the organization requesting the field/park. I hereby expressly agree individually and on behalf of said organization to indemnify and forever hold harmless the Golf Maine Park District as to any claim or claims, which arise out of the field/park. In addition, I assume the following responsibilities:

- Only that part of the field/park for which the request is made shall be used
- If the activity involves children, ample adult supervision will be in attendance for the entire time of the activity; Minimally, one (1) adult for every fifteen (15) children.
- Proper care will be given to the premises, with garbage and other left-over materials deposited in the appropriate receptacles provided.

I assume the financial responsibility individually and on behalf of said organization for any part of the field/park damaged during the hours the organization is using the field and/or facilities. I realize the Golf Maine Park District, or a representative thereof, can revoke the privilege of using the field/park should it deem necessary to do so for any reason.

Signature _____

Date _____

NO ALCOHOLIC BEVERAGES ARE PERMITTED ON THE GOLF MAINE PARK DISTRICT OPEN SPACES, PARKING LOTS, OR TENNIS/BASKETBALL COURTS



The right to use the facilities listed above is granted by the Golf Maine Park District to the party named herein. Users of the Park District facilities are required to comply with this permit.

Users are subject to all ordinances and regulations of the Golf Maine Park District. This permit must be available for the inspection by authorized personal.

If any of the facilities permitted for use are deemed unusable due to the weather or conditions, permitted groups will be asked to move to another area, if one such is available. If there is not another area available, the permit is no longer valid for that day of issue. Any Park District personnel or security may make judgment upon field/space conditions. Once a field is deemed unusable, it will be closed for the day. The Park District has a rain number to call in case of inclement weather. Please do not call more than one (1) hour prior to permit times. The rain number is (847) 297-5779.

Field	Resident Rate	Non-Resident Rate
Baseball Field	\$30/Hr + \$50 Deposit After 7pm \$50/Hr	\$60/Hr
Soccer Field	\$30/Hr + \$50 Deposit After 7pm \$50/Hr	\$60/Hr
Sand Volleyball Court	\$10/Hr + \$50 Deposit	\$20/Hr
Water Spray Park	\$100/2 Hrs	\$150/Hr
Cricket Pitch	\$50/2Hrs After 7pm \$30 additional per Hr	\$75/2 Hrs After 7pm \$30 additional per Hr
Horseshoe Pits	\$5/Hr + \$70 Deposit	\$10/Hr
Basketball Court	\$20/Hr + \$50 Deposit	\$40/Hr
Tennis Courts	\$20/Hr + \$50 Deposit	\$40/Hr
Shuffle Board Court	\$5/Hr + \$100 Deposit	\$10/Hr

FOR OFFICE USE ONLY

Amount of Deposit _____

Date _____

Amount of Rental _____

Date _____

Total Amount Paid _____

Approved By _____

Date _____