

# FEATHER RIVER RECREATION AND PARK DISTRICT

1200 Myers Street, Oroville, CA 95965

## APPLICATION AND AGREEMENT FOR USE OF

Nelson Pool located at the Thermailito Family Center

Date (s): \_\_\_\_\_

Start Time: \_\_\_\_\_

Finish Time: \_\_\_\_\_

### PURPOSE OF USE

\_\_\_\_\_

EXPECTED ATTENDANCE: Adults \_\_\_\_\_ Minors \_\_\_\_\_

Is the public invited? Yes No

Will admission be charged? Yes No

Will donations be accepted? Yes No

If yes, what will the proceeds be used for?

\_\_\_\_\_

### APPLICANT INFORMATION

Organization \_\_\_\_\_

Applicant Name \_\_\_\_\_

Applicant Email \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_

Phone # \_\_\_\_\_

### SECONDARY CONTACT INFORMATION

Name \_\_\_\_\_

Phone # \_\_\_\_\_

### WAIVER

I/We shall indemnify, defend, and hold harmless the Feather River Recreation and Park District, its officers, employees, and agents from any and all losses, costs, expenses, claims, liabilities, actions, or damages, including liability for injuries or illness to any person or persons or damage to property arising at any time during and/or arising out of or in any way connected with my use or occupancy of the facility, adjoining property, athletic fields or courts and pools unless solely caused by the gross negligence or willful misconduct of the Feather River Recreation and Park District, its officers, employees, or agents. I/We agree to abide by and enforce the rules and regulations of the Feather River Recreation and Park District, and certify that I/We have read the rules and regulations attached to this application.

Applicant waives any right of recovery against the Feather River Recreation and Park District, its officers, employees, and agents for indemnification, contribution, or declaratory relief arising out of or in any way connected with applicant's use or occupancy of the facility, adjoining property, athletic fields or courts and pools, even if the Feather River Recreation and Park District, its officers, employees, or agents seek recovery against applicant.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### FOR DISTRICT USE ONLY

Application for Use of Swimming Pool is Approved:

By \_\_\_\_\_

*Approved Subject to Conditions Listed on the Attached Pages*

Date: \_\_\_\_\_

TRANSACTION FEE (non-refundable) \$ \_\_\_\_\_

RENTAL RATE \$ \_\_\_\_\_

FACILITY DEPOSIT \$ \_\_\_\_\_

TOTAL FEES \$ \_\_\_\_\_

PAID ON: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ \$ \_\_\_\_\_

BALANCE DUE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ \$ \_\_\_\_\_