



CITY OF
MARION
PARKS & RECREATION
PARK SUPERINTENDENT KENNY BALLINGER

Parks & Recreation
 1530 Pole Lane Road
 Marion, Ohio 43302
 740.387.5370
 kballinger@marionohio.org

Shelter Reservation Application & Agreement

Date of Event: _____ Park: _____ Shelter: _____ Expected # of People: _____

Name and/or Organization: _____

Mailing Address: _____

Phone: _____ Email: _____

Please read General Rules and Sign:

- A partial refund will be made if canceled 60 days prior to the reservation date. A \$10 processing fee will be retained. **NO REFUNDS** will be made due to rain or bad weather.
- Tents/Inflatables/etc. must be approved by the Parks Department and may require proof of insurance.
- **No alcoholic beverages, tobacco products or other illicit substances** are to be consumed and/or distributed.
- Absolutely **No** staples, nails or tacks are to be used for table coverings or decorations. All decorations must be hung using masking tape. Please remove tape, following the activity.
- Please leave charcoal ashes in the grill. Do not place ashes in trash containers. Renters are responsible for making sure that all coals are cooled before leaving. Do not use wood in grills.
- Renters are responsible to provide trash bags for their event, and to dispose their waste into the **trash dumpsters**. Please do not fill up the trash barrels.
- The renter agrees to clean up the shelter and vicinity and understands a bill for clean-up costs (\$25.00 minimum) could be payable if not cleaned satisfactorily.
- All rules and ordinances governing Marion City Parks must be observed at all times including driving and parking in designated areas. **Absolutely No Parking on the Grass!**
- **For an Emergency, please Call Marion City Police Department (740) 387-2525 or 911 if applicable.**

I have read and understand the rules and regulations governing the use of the above facility and agree to abide by said rules, regulations, and policies. I understand that I, the undersigned, will be held completely and totally responsible for any and all damages that are incurred during the course of the rental and the rental fee in no way limits my liability to the extent of damage. I, the undersigned, also understand that I am responsible for the application of insurance proceeds, if any, to the repair or replacement of the premises or property thereon necessitated by any damages due to negligence, accidents or on purpose, and if not insured, I shall repair the demised premises or replace property thereon solely at my expense.

The City of Marion Parks Department does not assume liability for any injury or death, or loss of personal property to renter or any individual or group associated, employed, or in conjunction with renter on any individual or group associated, employed, or in conjunction with renter on or about the premises, sidewalks or alleys, adjoining the premises for the following circumstances. (1) A loss of property by theft or burglary; (2) Accidental damage to person or property from the use of any utility on the premises; (3) Damage caused by action of the natural elements, or, (4) Damage or injury resulting from the conduct of employees or renter whether negligent or otherwise. Renter shall not make any claims against the City of Marion Parks Department for any loss or damage described herein. Renter shall also indemnify the Parks Department against all claims by any individual group, associate, employee, agent or guest of renter.

The City of Marion Parks Department reserves the right to deny use of the City Parks and facilities to the groups that fail to comply with the rules and regulations set forth by the Marion Parks Department and the City of Marion. It is understood that the group/organization using the above park/facility will comply with the laws of the State of Ohio, the City of Marion, and all rules and regulations set forth by the City of Marion Parks Department. **NOTE: PARKS CLOSED – DUSK TO DAWN**

 Signature of Responsible Party

 Date

For Internal Use Only

Amount paid _____ Cash _____ Credit Card _____ Check # _____ Date _____ Receipt # _____ Staff _____

