

EVENT DATE _____



SYCAMORE TOWNSHIP RECREATION FACILITIES PERMIT

TODAY'S DATE _____

PERMIT FOR USE OF SCHULER COMMUNITY ROOM

ORGANIZATION _____

START TIME _____ END TIME _____

PERSON IN CHARGE _____

	NAME	ADDRESS	CITY STATE ZIP
PHONE NUMBER	_____	E-MAIL	_____

ACTIVITY _____ BALL FIELD # _____ BALL FIELD TIME _____

The undersigned hereby indemnifies and agrees to hold harmless Sycamore Township, its officials, employees and agents from any claims, damages, awards, litigation, injuries, or any other cause of action, including any expenses of defense thereof arising out of the undersigned's use of property.

Organizations using the above properties assume full responsibility in case of damage and will be held liable to pay for same.

The facilities are to be left in at least as good a condition as they were found. Each group should give reasonable consideration to others who might want to use some of the facilities.

THE TRUSTEES RESERVE THE RIGHT TO RELOCATE OR CANCEL ANY GROUP.

ORGANIZATION

SIGNATURE OF PERSON IN CHARGE

PERMISSION IS HEREBY GRANTED TO USE THE RECREATION FACILITIES FOR PURPOSES OUTLINED ABOVE AND ON ABOVE DATES AND TIME.

SYCAMORE TOWNSHIP TRUSTEES

You can now book your reservation online at www.sycamoretownship.org, fee is due at the time of booking. In the event that you do not have a computer, please sign a copy of this agreement then fax to 513-792-8564, e-mail to info@sycamoretownship.org or mail to Sycamore Township Administration Building, 8540 Kenwood Road, Cincinnati, Ohio 45236 along with your fee and deposit (cash or check). If you need to cancel, you are asked to give a 30 day notice to receive a full deposit refund.

Please bring this permit with you on the day of the event.

Thank you,

Sycamore Township
513-791-8447