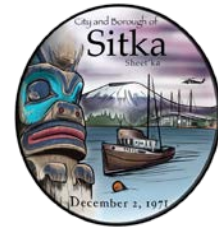


City and Borough of Sitka



ATHLETIC FIELD USE PERMIT APPLICATION

Submit this application to the Public Works office on the second floor of City Hall (100 Lincoln Street), or to the publicworks@cityofsitka.org email, per season.

APPLICANT INFORMATION

Today's Date: _____

Name of Team or Group: _____

Contact 1: _____

Contact 2: _____

Phone: _____

Phone : _____

Email: _____

Email: _____

Mailing Address: _____

Mailing Address: _____

Requested Day(s) of the Week: _____

Requested Times: _____

Season Date Range (including end date): _____

FIELD LOCATION REQUEST:

___ **Moller Complex**

___ Upper Field

___ Lights

___ Lower Field

___ **Kimsham Complex**

___ Field A

___ Field B

___ Field C

___ Field D – Krueger

___ **Keet Gooshi Heen**

___ Field A

___ Field B

___ **Blatchley – Vilandre**

FEES PER SEASON:

Number of Adult Softball Teams _____ x \$250.00 = _____ TOTAL PLAYER FEE

---OR---

Number of Players _____ x \$5.00 = _____ TOTAL PLAYER FEE

+ _____ Tax (5% Oct-March or 6% April-September)

_____ TOTAL FEE with TAX

Signature: _____

Date: _____

WAIVER AND RELEASE: I, duly authorized on behalf of the applying organization, hereby certifies that said organization/team/group will agree to hold the City and Borough of Sitka harmless from any and all claims for injury or damage to persons or property suffered in connection with the permittee's activities unless such injury or damage is caused by the gross negligence of the City and Borough of Sitka. I certify the information contained in this application is true to the best of my knowledge. As group representative, I hereby agree to take responsibility to inform and assure that all group members follow the rules and the Public Use of Parks and Recreation Facilities Ordinance of the City and Borough of Sitka. (Chapter 23.30, available upon request).