

RECREATION FACILITY AGREEMENT



Chocolay Charter Township
Public Works Department
5010 US 41 South
Marquette, MI 49855
Phone: 906-249-1448 Fax: 906-249-1313

RECREATION AREA AND DATES REQUESTED

Area Requested

Beaver Grove Recreation Area

- Ball field
- Pavilion
- Soccer field

Silver Creek Recreation Area

- Ball field
- Soccer field
- Disc Golf (Tournament Play)

Lion's Field

- Ball field
- Pavilion

Date(s) and time(s) requested _____

FEES

- Pavilion \$50 Fee / \$50 Deposit
- Baseball / Soccer League (Adult) \$160 per League / year / field
- Baseball / Soccer League (< 17 Yrs.) \$85 per League / year / field
- One Day Field Rental (Non-Commercial) \$50 per day per field
- One Day Disc Golf Rental - Tournament \$50 per day
- Tournaments / Camps \$150 per day per field

Total Amount \$ _____

FOR OFFICE USE ONLY

Receipt # _____ Amount \$ _____

Collector _____

Facility condition after use

Note

A minimum of 50% of daylight hours in any given week is established as non-reserved time for use of the facility by the general public.

(User / Representative) _____ agrees to the following conditions and terms for using a Chocoley Township recreational facility.

1. All individuals, organizations, leagues, workshops or similar groups who wish to reserve any recreational facility shall pay a fee to the Township in the amount indicated above prior to the use of the facility.
2. First preference for recreational facilities is given to individuals, leagues or other organized groups that are composed of Chocoley Township residents.
3. The User / Representative agrees to pay for all damages that are caused during the rental period. If, prior to use, the User / Representative finds damage to the facility, the damage should be promptly reported to the Chocoley Township Police Department. By the next business day, this damage shall be reported to the Township Office indicating the type, location, extent, and time found. Normal wear of the ball field and soccer field surfaces incurred during the playing of a scheduled game is excluded.
4. The Township will perform routine maintenance of the facility at its convenience.
5. If the Township incurs any cost for extra maintenance of a facility or repair of damage caused by the User, the User is responsible for any and all charges. The DPW Foreman will determine if the deposit will be returned, based on condition of facility after use.
6. The facility will be secured, maintained and left in the general condition in which it was found. All litter will be placed in provided trash containers.
7. Tournaments or consecutive play-off schedules are allowed use of the facility, but such use is limited to no more than three days per week.
8. Hours of operation for recreation areas are from dawn to dusk.
9. **No alcoholic beverages** are allowed on Township properties or in Township buildings.
10. There is **no smoking** permitted in the Township Hall or Fire Hall buildings.
11. The User / Representative will supply nets for the soccer field and be responsible for their placement and removal.
12. The User / Representative will supply the Township with an approved written schedule of use. This schedule should include teams, games and times. Use of the facility outside this schedule must be approved by the Township.
13. The Township may close the facility at any time for reasons of safety, maintenance, or preventative maintenance. This information will be posted near the facility by 4:00 PM during weekdays. Officials of the User / Representative may contact the Township Office for this information prior to 4:30 PM on weekdays.
14. Any User / Representative wishing to sign out keys must contact the Township Office in person.
15. The Township reserves the right to waive certain conditions or add special conditions to this agreement.
16. If the User violates any part of this Agreement, use of the facility will be denied.

I, the undersigned, on behalf of myself, associates, my heirs, legatees, and assigns, hereby agree to indemnify, save, and hold harmless the Charter Township of Chocoley or any of its agents, representatives, employees, or assigns, for any sickness, injury, or disability arising out of or resulting from the use of Chocoley Township facilities or grounds.

I have read and understand the foregoing.

Signature _____ Date _____

User / Representative (print name) _____

Address _____

Contact number _____