

***City of Kingsford***  
**APPLICATION TO USE COMMEMORATIVE SOCCER FIELD & FACILITIES**

1. First & Last Name: \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No. \_\_\_\_\_ Email \_\_\_\_\_
2. Is anyone sponsoring the event?  Yes  No If yes, provide name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No. \_\_\_\_\_ Email \_\_\_\_\_
3. Date(s) requested: \_\_\_\_\_ (Please attach schedule if applicable.)  
Time requested: \_\_\_\_\_  
Purpose: \_\_\_\_\_
4. Name of party responsible for lining the field: \_\_\_\_\_

**Requirements to use Commemorative Soccer Field & Facilities**

- \$100.00 refundable deposit
- \$50.00/per game
- I have read and understand the attached rules and agree to abide by all responsibilities listed.  
Initials \_\_\_\_\_

**LIABILITY INSURANCE**

5. Name of provider \_\_\_\_\_ Policy Number \_\_\_\_\_ Please attach a copy of the Certificate of Insurance listing the City of Kingsford as an additional insured.
6. Other relevant information \_\_\_\_\_

**VERIFICATION**

I, the undersigned applicant, hereby acknowledge that I am aware that the City of Kingsford Code of Ordinances Sec. 26-41 has terms and conditions for the use of parks in the City of Kingsford. Further, I understand and agree that I will abide by all of the terms and conditions noted in said ordinances.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**AUTHORIZATION AND PERMIT**

I, the undersigned, on behalf of the City of Kingsford based upon the information contained in this application, hereby authorize the requested activity and issue a permit, subject to the conditions set forth in the City of Kingsford Code of Ordinances Sec. 26-41, and the following:

Signature of City Manager or Designee: \_\_\_\_\_ Date: \_\_\_\_\_

Internal use only

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

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

Deposit Received: yes / no

Per Game Fee Received: yes / no

Reserved on Calendar: yes / no

Notified KPS & DPW: yes / no

*This Institution is an Equal Opportunity Provider, and Employer*