

UPPER SOUTHAMPTON TOWNSHIP PARKS AND RECREATION DEPARTMENT

913 Willow Street ● Southampton, PA 18966

Community Center Office – 215-355-9781

DATE _____

FACILITIES USE APPLICATION

FACILITIES REQUESTED

TAMANEND PARK:

- Farmhouse
- Carriage House
- Pavilion #1 W/Fireplace
- Pavilion #2
- Lion's Grove

COMMUNITY CENTER:

- Meeting Room

Day(s) of the Week _____ Date(s) _____ Hours: From _____ To _____

of Attendees _____ Admission Fee Charged? Yes No Resident Group? Yes No

Purpose: _____

GENERAL RULES AND REGULATIONS:

Must be 18-years-old and have a valid Driver's License. NO ALCOHOL, open fires, solicitation, hunting, fishing, swimming. NO unleashed pets – owners are responsible for cleaning up pet waste. NO dogs allowed on playing fields. NO motor vehicles off paved or stone roads. NO damaging, destroying or removing of trees, plants or shrubs. USE OF SMOKE AND/OR LIQUID MACHINES PROHIBITED. Keys for the Carriage House and/or Farmhouse should be picked up on the Thursday or Friday before a weekend rental.

IF THERE ARE ANY PROBLEMS DURING EVENTS PLEASE CALL 267-264-9442.

I HAVE RECEIVED AND READ THE ABOVE UPPER SOUTHAMPTON TOWNSHIP PARKS AND RECREATION RULES AND REGULATIONS RELATING TO THE USE OF ITS FACILITIES AND EQUIPMENT AND ACCEPT RESPONSIBILITY FOR MEETING THE REQUIREMENTS STATED THEREIN.

Signature of Applicant _____

Print Name
Address
Email
Telephone (Home) (Cell)

Office Use Only	
Approved _____	Not Approved _____
Authorizing Official _____	
Facility Rental	
Deposit _____	Fee _____
Other _____	Fee _____
Total _____	
Please provide separate checks, payable to "USPR," for rental fee and deposit.	

Sports Organizations must provide a Certificate of Insurance with Application.

**UPPER SOUTHAMPTON PARKS AND RECREATION PROGRAM PARTICIPANT
LIABILITY WAIVER AND RELEASE**

In consideration for being permitted to use Upper Southampton Township’s facilities and/or participate in Upper Southampton Township-sponsored programs, I agree, for myself and/or for any minors in my care, to fully and completely release Upper Southampton Township, its officials, employees, boards, departments, agents and affiliated entities from any and all claims, liabilities or actions for any personal injuries to me, personal injuries to minors in my care and/or any loss or damage to my personal property or the personal property of any such minors arising from our use of Upper Southampton Township facilities or participation in Upper Southampton Township Parks and Recreation-sponsored activities and programs.

I certify that to the best of my knowledge, I and/or any minors in my care are healthy enough to participate in the recreation program sponsored by Upper Southampton Township Parks and Recreation Department.

I understand that no health and/or accident insurance is provided by Upper Southampton Township. I also understand and agree, for myself, and/or for any minors in my care, that I am solely responsible at any sole cost and expense for furnishing medical or other insurance to cover any expenses related to any such personal injuries or property damage.

I hereby give Upper Southampton Township Parks and Recreation staff permission to secure emergency medical care for minors in my care who may suffer an injury or illness while in the temporary care of Upper Southampton Township Parks and Recreation representatives.

I agree, for myself and/or for any minors in my care, to comply with all Upper Southampton Township Parks and Recreation rules and regulations, including any rules and regulations governing any programs for which I, and/or any minors in my care, have registered, and understand and agree that noncompliance with any such rules and regulations by me, or any minors in my care, may result in termination of the privilege to use Upper Southampton Parks and Recreation facilities and/or participate in Upper Southampton Township Parks and Recreation-sponsored activities and programs. In the event of such a termination for cause, I understand that I will not be entitled to be reimbursed for any registration fees.

I further agree, for myself and/or for any minors in my care, that I will furnish a certified birth certificate or proof of birth upon request by Upper Southampton Township Parks and Recreation, as may be required for participation in Upper Southampton Township Parks and Recreation activities and programs.

I grant the right to use my/our name, image, photograph and video, including composite or modification, representations in publications, brochures, newsletters, reports, website and any other material relating to Upper Southampton Township Parks and Recreational programs, activities and facilities. I waive the right to inspect or approve versions of my/our image used for publication or the written copy that may be used in connection with the image.

Intending to be legally bound hereby, and with full authority, I acknowledge, agree to and accept the terms of this Liability Waiver and Release on behalf of myself and/or on behalf of any minors in my care.

Participant Name (Print): _____

Participant Signature: _____

If participant is under age 18

Parent/Guardian’s Name (Print): _____

Parent/Guardian’s Signature: _____

Date: _____