

**FIELD USE APPLICATION**



Event Title: \_\_\_\_\_ IVGID Resident (circle one):      Yes      No  
 Event Date: \_\_\_\_\_ Booking Number: \_\_\_\_\_  
 Name of Applicant: \_\_\_\_\_ E-mail address: \_\_\_\_\_  
 Name of Organization: \_\_\_\_\_ Phone (home): \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Phone (bus.): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Facility Requested:**

- Preston Field
- Incline Park Field #1 (soccer/softball)
- Incline Park Field #2 (Youth Field)
- Incline Park Field #3 (baseball/softball)
- Village Green (lower)
- Village Green (upper)
- Skateboard Park
- Recreation Center Bocce Ball Courts

**Additional Amenities:**

- Field Lights
- Scoreboard
- Soccer Goals
- Bocce Ball Equip
- Other \_\_\_\_\_

**Type of Use:**

- League team practice
- Sports Tournament
- Community Event
- Fundraiser
- Private Party
- Other \_\_\_\_\_

Approximate number of people: \_\_\_\_\_ Closing time: \_\_\_\_\_  
 Requested facility opening time: \_\_\_\_\_ Expiration date: \_\_\_\_\_  
 Non-Profit Number: \_\_\_\_\_  
 (Please attach Federal or State non-profit status verification)

Alcohol beverages served? (circle one)    Yes    No    Will alcohol be sold? (circle one)    Yes    No  
 Liquor license number: \_\_\_\_\_ Insurance policy#: \_\_\_\_\_  
 Insurance carrier: \_\_\_\_\_ Amount: \_\_\_\_\_  
 Description of event and special needs: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I have read and understand the statements on the reverse of this form and agree to all conditions of this contract and so indicate by my signature below.

\_\_\_\_\_  
 Applicant Signature                      Parcel Number                      Rec. Pass #                      Date

**OFFICE USE ONLY**

Notes: \_\_\_\_\_  
 \_\_\_\_\_

Billing Status (circle one):    Regular    Res. Commercial    Res. Individual    Local non-profit    Exempt

\_\_\_\_\_  
 Recreation Manager                      Date  
 Booked by: \_\_\_\_\_ Date: \_\_\_\_\_ Security Deposit: \_\_\_\_\_ Receipt #: \_\_\_\_\_  
 Date Invoiced: \_\_\_\_\_ Invoice: \_\_\_\_\_ Payment Type: Ch Cash CC    Amount Rcvd: \_\_\_\_\_



## FIELD USE APPLICATION

I hereby assume all responsibility for any physical damage to premises or liability incurred as a result of this function. It is understood that the Incline Village General Improvement District reserves the right to impose any requirements felt necessary after review of this application. Should IVGID believe that there is a potential danger to persons or property, or violation of local, state, an/or federal laws, or IVGID rules and regulations based on activities at a given function, then IVGID reserves the right to terminate the function immediately or while in progress. All fees must be paid for facility use up to the time of termination.

I/We understand that the person signing this contract will be on-site during the entire event. Should the person signing this contract not be on-site, IVGID shall assume that fraudulent use of Recreation Privileges has occurred. False or misleading information to attain resident rates at IVGID facilities will be grounds for voiding all recreation privileges issued against the parcel. IVGID reserves the right to pursue any other legal action.

IVGID does not insure to the benefit of any parties utilizing the district facilities be it public liability or damage to the property. Further, although IVGID does not normally require insurance, it does reserve the right to require insurance for specific events. When insurance is not required, renters should understand that they're exposing themselves and/or their organization to significant risks by sponsoring an event, and that those risks are significantly higher if alcohol is served. When insurance is required or provided, renters should ensure that coverage includes IVGID "additional insured" and provide a "certificate of insurance" that arrives at the Administration Department not less than 30 days prior to the event.

\_\_\_\_\_ A security deposit is required for many facility reservations. No fees will be refunded if the sheriff's department is  
*Initials* called to the event.

The charges for facility rental will be paid at the time of booking. To be eligible for any Incline Village "Resident" rental rates, the applicant must hold and provide staff with a valid IVGID recreation pass, and be current in all taxes and recreation assessments.

\_\_\_\_\_ Should an event be canceled by the applicant more than 30 days prior to the schedule date, all user fees paid will be  
*Initials* refunded. Should an applicant cancel the scheduled event within 30 days of the scheduled date, the applicant will forfeit 50% of the user fees.

\_\_\_\_\_ Confirmation indicates the requested facility is available on the date requested. Confirmation does not guarantee facility  
*Initials* availability, in the event that circumstances beyond IVGID/s reasonable control prevent the facility's availability (i.e. weather, vandalism, and/or other factors).

It is further understood that should rates change after this application is submitted, but before the date applied for, prevailing rates at the time to the event will be applicable.

\_\_\_\_\_ I/We understand the facility and the grounds around the facility will be left clear of all debris and personal belongings.  
*Initials*

**PLEASE SIGNIFY YOUR UNDERSTANDING AND ACCEPTANCE OF THE ABOVE POLICIES BY SIGNING THE FRONT PORTION OF THIS FORM & INITIALIZING THE ABOVE STATEMENTS. THIS APPLICATION WILL NOT BE CONSIDERED OR APPROVED WITHOUT YOUR SIGNATURE.**

**Incline Village Parks and Recreation Department  
980 Incline Way. Incline Village, NV 89451 / Ph 775.832.1310 / Fx 775.832.1380**