

NORTH PARK FIELD HOUSE
FACILITY PERMIT APPLICATION

Inverness Park District
300 North Highland Road
Inverness, IL 60067

Application Date: _____

Date(s) Requested: _____

Start Time: _____

Until: _____

Applicant: _____

Address: _____

City/State/Zip Code: _____

Phone: (H) _____

(W) _____

Equipment Desired: _____

I/We agree to hold harmless the Inverness Park District, Cook County, Illinois, the Park Board, its officers employees and agents: and to assume responsibility for and defend at my/our expense all claims for damage to property and persons, including medical expenses for injuries incurred and arising incidental to the use of the facilities involved. It being further understood and agreed that the Inverness Park District assumes no obligation or responsibility in connection with said use of facility(ies). I/We further agree to assume all cost of damage to contents. I/We further agree to adhere to the statement of policy and the terms and conditions set forth by the Park District as well as the terms and conditions relating to Park District Permits.

CANCELLATION CLAUSE: Applicant cancellations must be received in writing at least five (5) days prior to the reserved time. Failure to comply with this requirement will result in the loss of the deposit. The Inverness Park District reserves the right to cancel this permit when deemed necessary.

Signature of Applicant _____

Date _____

Please fill out the application and return it to the Inverness Park District. Approval or denial will be returned in the mail. Deposit of \$70.00 due at time of application. Deposit is refundable after completion of rental.

For Office Use Only

Date Application and Deposit Received: _____

Approved By: _____ Date: _____

Fee per Hour _____ X Hrs. _____ Hrs. = _____