



CITY OF SHOREWOOD

5755 Country Club Road • Shorewood, Minnesota 55331 • 952-960-7900

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Athletic Field Reservation Form

Name of Organization: _____
Contact Person: _____ Title: _____
Phone (H): _____ (W): _____
Address: _____
City: _____ State: _____ Zip: _____
E-Mail: _____

Athletic Field Fee as per City Code 1301.02:

Damage Deposit			\$125.00
Per Diamond Field	per field	_____ x \$50.00/day	\$ _____
Per Rink	per rink	_____ x \$30.00/day plus attendant salary	\$ _____
			\$ _____
Lights:		\$15.00/hour	\$ _____
Per Entire Soccer Area		\$150/day	\$ _____
Per Football Field		\$ 50.00/hour or	
		\$210/day	\$ _____
Lights:		\$ 30.00/hour	\$ _____
		TOTAL:	\$ _____
Tennis Courts	\$5 per court/per hour	TOTAL:	\$ _____

Facility Requested: _____ Area Requested: _____

Type of Event: _____

Date(s) Requested: _____ Times: Start: _____ End: _____

Date(s) Requested: _____ Times: Start: _____ End: _____

Date(s) Requested: _____ Times: Start: _____ End: _____

Date(s) Requested: _____ Times: Start: _____ End: _____

Facility user shall indemnify and hold harmless the City of Shorewood; it's Park and Recreation Department; it's officers, agents, and employees from and against all claims, damages, losses, or expenses, including attorneys fees, which they may suffer or for which they may be held liable, and do thereby for myself, my heirs, executor, and administrators, waive, release, and forever discharge any and all claims for damages which may have or which may hereafter occur to a group, arising out of or connected with a group's participation at Shorewood's facilities.

Signature of Authorized Representative _____

Date _____

OFFICE USE ONLY

Date Received: _____ Approved by: _____ Date Returned: _____

Comments: _____