



IVINS CITY

FACILITY RESERVATION AGREEMENT

Date of Request: _____

Person making reservation: _____ Telephone: _____

Facility to be reserved: _____

Purpose of reservation: _____

Number of people: _____

Date of reservation: _____

Time of reservation: _____

RULES

1. Please make sure all trash is picked up and placed in the proper garbage bins.
2. If using the grills at the pavilions, do not leave charcoal burning. Extinguish and remove properly.
3. Do not walk, dance, skateboard, etc. on the tables or benches.
4. If you have any pets in the park, please make sure that you clean up after them.
5. If you intend to have entertainment (Bounce House, Climbing Wall or music), please notify Parks & Recreation for information. The company providing the entertainment **MUST** have insurance. Ivins City should be named on the insurance. If company does not have insurance, then the person making reservations will be required to put Ivins City on their Homeowners' Insurance. Deposit will be required.

I, the undersigned, understand and will abide by all rules and regulations governing the use of Ivins City facilities. (Reference Ivins City Ordinances)

Signed by person making reservation

Date

OFFICE USE ONLY

Fee Paid \$ _____ Check # _____ Cash _____ Date Paid _____

GL Code: **10-38-900**

Entertainment: ___Y ___N

Insurance: ___Y___N