

# CITY OF LORAIN PARK PERMIT

Day of Week

Month

Day

Year

## AGREEMENT:

EVENT  
DATE 

It is expressly understood that this permit may be revoked at any time by the Director of Parks and Recreation. The undersigned applicant agrees for himself and for the organization or group represented by him that the use of the public park for which this permit is issued will be conducted in an orderly manner, that nothing will be said or done to discredit or tend to discredit the form of government of the United States, or any of its political sub-divisions or that will incite disturbance, or that violates or tends to violate or produce a violation of any of the ordinances of the City of Lorain, or the laws of the State of Ohio, or the United States.

Additional  
Dates \_\_\_\_\_

**HOURS** (5 Hour Max) from \_\_\_\_\_ to \_\_\_\_\_

**PARK NAME** \_\_\_\_\_

**Location Within Park** \_\_\_\_\_

Type of Function \_\_\_\_\_

Estimated Expected Attendance \_\_\_\_\_

## RELEASE and WAIVER

I, the duly authorized representative-in-charge, do hereby release the City of Lorain from any and all liability for any injuries which may be sustained by any and all participants during the use of this public park on the above date and time. I hereby waive any further legal rights to file suit against the City of Lorain for any injuries received by or any damages sustained to any personal possessions which may be incurred during said use of the public park. I finally agree that I, as the duly authorized representative-in-charge, assume any and all liability which may be incurred during the use of the public park.

**SPECIAL REQUESTS**

(If Any) \_\_\_\_\_

**CONDITIONS:** The undersigned hereby agrees to assume responsibility for leaving the reserved area in the same condition as it was when reserved. It is strongly suggested that any essential toiletries be taken to the site for the event and removed upon departure.

✱ Please **PRINT** the following information ✱

ORGANIZATION NAME (IF APPLICABLE) \_\_\_\_\_

ORGANIZATION ADDRESS \_\_\_\_\_

REPRESENTATIVE-IN-CHARGE \_\_\_\_\_ PHONE \_\_\_\_\_

REPRESENTATIVE'S ADDRESS \_\_\_\_\_ CITY & ZIP \_\_\_\_\_

REPRESENTATIVE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## PARK PERMIT NO. 06 - \_\_\_\_\_

Is hereby granted in accordance with the application information herein.

**DATE** \_\_\_\_\_ **APPROVED** \_\_\_\_\_

James B. Kudrin  
Acting Director of Lorain Parks & Recreation Department

LORAIN PARKS & RECREATION DEPARTMENT 329 TENTH STREET (440) 244-9000