

APPLICATION "D"

APPLICATION FOR USE/RENTAL OF FACILITIES

5K OR PARK-WIDE EVENT

FOREST OAKS SWIM AND RACQUET CLUB

19023 Joanleigh

Spring, Texas 77388

Office: 281-353-0998 Email: office@hcwcid110.com



Applicant (full name): _____ Today's Date: _____

Address: _____

District Residential Status: In-District Non-District FOSRC Member Status: Member Non-Member

Primary Phone Number: _____ Secondary Phone Number: _____

Email Address: _____ Driver License State: ____ DL#: _____

Event Date Requested: _____ Hours Of Use: _____ Number Of Anticipated Guests: _____

Function Being Conducted: _____

PLEASE CHECK THE FACILITY FOR WHICH YOU ARE APPLYING:

_____ 5K Route only _____ 5K Route & Main Pavilion (Main Pavilion not in park)

_____ 5K Route and Park Pavilion(s) Park Pavilions Requested (if any): 1 2 3 4 5 7 8

Total number of expected: Event Staff: _____ Event Volunteers: _____ Event Safety: _____

Event set-up start time: _____ Event check-in start time: _____ Event take-down end time: _____

Applicant providing portable toilets: Yes No

Requesting to rent WCID110 restroom trailer: Yes No

OFFICE USE ONLY

Fee Received: \$ _____ Date: _____ Form of Payment: _____

Security Required: Yes No How many: _____ Dep Received: _____ Date Received: _____

Key Card Provided Date: _____ Dep Refunded: \$ _____ Date Refunded: _____

Key Card Returned Date: _____ Dep Kept: \$ _____

Reason for kept deposit: _____

I, THE UNDERSIGNED APPLICANT, DO HEREBY CERTIFY THAT I HAVE READ THE FACILITIES USE AGREEMENT ATTACHED HERETO AND THAT I HAVE BEEN PROVIDED A COPY OF SUCH AGREEMENT. I UNDERSTAND THE RULES AND REGULATIONS RELATING TO THE USE OF THE FACILITIES. I ALSO UNDERSTAND THAT BY USING THE FACILITIES I CONSENT TO ABIDE BY THE RULES AND REGULATIONS. I FURTHER AGREE TO INDEMNIFY HARRIS COUNTY WATER CONTROL AND IMPROVEMENT DISTRICT NO. 110 (THE "DISTRICT"), ITS AGENTS, EMPLOYEES AND THE DISTRICT MANAGER FOR MY USE OF THE FACILITIES AS SET FORTH BELOW.

I AGREE TO RETURN THE KEY TO THE PARKS AND RECREATION OFFICE WITHIN 48 HOURS, THAT I WILL CLEAN THE FACILITIES AND RESTORE THE FACILITIES TO THE CONDITION IT WAS IN PRIOR TO MY USE. I UNDERSTAND THAT IF THE FACILITIES OR GROUNDS ARE NOT CLEANED OR ARE DAMAGED, THE DISTRICT WILL MAKE THE NECESSARY REPAIRS AND/OR CLEAN THE FACILITIES AND WILL DEDUCT THE COST OF THE CLEANING/REPAIRS PLUS RETAIN THE \$50.00 ADMINISTRATIVE FEE FROM THE DEPOSIT. IF THE COST OF REPAIRS EXCEEDS THE DEPOSIT, I UNDERSTAND I WILL BE REQUIRED TO PAY THE BALANCE.

IN CONSIDERATION FOR THE USE OF THE FACILITIES OWNED BY THE DISTRICT, THE UNDERSIGNED APPLICANT ("APPLICANT") HEREBY AGREES TO INDEMNIFY, SAVE AND HOLD HARMLESS, AND DEFEND THE DISTRICT, ITS BOARD OF DIRECTORS AND THE DISTRICT MANAGER, AND ALL THEIR AGENTS, REPRESENTATIVES, EMPLOYEES, AND CONSULTANTS FROM ANY AND ALL SUITS, ACTIONS, OR CLAIMS OF ANY CHARACTER, TYPE, BROUGHT OR MADE BY ANY PERSON OR ENTITY FOR OR ON ACCOUNT OF ANY INJURIES OR DAMAGES RECEIVED OR SUSTAINED OR ALLEGED TO HAVE BEEN RECEIVED OR SUSTAINED BY ANY PERSON OR ENTITY ARISING OUT OF OR RELATED TO OR OCCASIONED BY APPLICANT'S USE OF THE FACILITIES OR SURROUNDING GROUNDS, WHETHER CAUSED BY THE SOLE NEGLIGENCE OF APPLICANT, THE SOLE NEGLIGENCE OF THE DISTRICT OR THE DISTRICT MANAGER OR A COMBINATION THEREOF, OR THE NEGLIGENCE OF ANY OTHER PERSON OR ENTITY.

I FULLY UNDERSTAND THAT CONSUMPTION OF ALCOHOL BY ANY MINOR PERSON (UNDER 21 YEARS OLD) ON DISTRICT PROPERTY IS STRICTLY PROHIBITED, THAT I WILL NOT ALLOW SUCH MINORS TO CONSUME ALCOHOL AT THIS EVENT, THAT ANY ALCOHOL RELATED INCIDENTS RESULTING FROM APPLICANT'S EVENT ARE THE SOLE RESPONSIBILITY OF APPLICANT AND THE PERSONS CONSUMING ALCOHOL, THAT NEITHER THE DISTRICT NOR FOREST OAKS SWIM & RACQUET CLUB WILL BE RESPONSIBLE FOR SUCH INCIDENTS AND ANYTIME BEFORE, DURING OR AFTER THIS EVENT.

I UNDERSTAND AND HERE BY CONSENT TO THE TERMINATION OF WATER SERVICE TO MY PROPERTY IN ACCORDANCE WITH THE DISTRICT'S RATE ORDER IF PAYMENT IS MADE BY A CHECK WHICH IS RETURNED FOR NON-SUFFICIENT FUNDS, OR A PAYMENT TO THE DISTRICT IS NOT HONORED BY THE MERCHANT BANK PROVIDED BY ME.

"APPLICANT"

Renter Signature: _____

Renter Printed Name: _____

Date: _____