

GLASER'S PARK – BATTING CAGE / BALL FIELD APPLICATION FORM

(Please print clearly)

APPLICANT INFORMATION

- **Full Name:** _____
 - **Mailing Address:** _____
 - **Phone Number:** _____
-

AREA(S) REQUESTED

(Available on a First Come – First Serve Basis)

- Batting Cage #3 Only
 - Ball Field(s)
-

MONTH(S) REQUESTED

Check one:

- \$100 for 12 consecutive months**
- \$10 per selected month**
(Please check each month you are requesting if paying monthly)

- June July August September
- October November December January
- February March April May

PAYMENT IS DUE IN ADVANCE. NO REFUNDS.

LIABILITY & AGREEMENT

I agree to follow all park rules and regulations. I understand that I am responsible for any damage or extra cleanup resulting from my use of the facility. I will ensure that all participants behave respectfully toward the park and its surrounding community.

Applicant Signature: _____ **Date:** _____

