

SAINT REGIS MOHAWK TRIBE

2019 Generations Park Complex Usage Application

Applicant Information

Name of Applicant:		
Group/Organization:		
Address of Applicant:		
City/Town:S	tate/Providence:Zip Code:	
Phone - (Day) :(Evening):	(Evening): (Cell):	
E-mail:		
Area Requested: (playground & bathrooms remain open for	public)	
Generations Park Main Field	Practice Field (behind lacrosse box)	
Tewathahita Trail Field	Tewathahita Walking Trail	
Travis Solomon Memorial Lacrosse Box	Pavilion	
Concession		
Data	s & Time	
Date	s œ Time	
Dates Requested: Start:	Finish:	
Day(s) Requested: Check All Dates that apply: MON TUES WED THUR	S FRI SAT SUN	
Program Time (s):am/pm toar	n/pm Number of Participants:	
Brief Event Description: please provide a g Please include any special accommodations (i.e. f equipment, notices posted to Face Book etc.)		
Please attach field schematics diagram with mea	surements and any pertinent advertising flyers.	

(Incomplete Application will be VOIDED - Complete each space)

Terms and Conditions for Usage

- 1. <u>Prior to approval of your Generations Park Complex use request, you and your team must agree to the following terms and conditions:</u>
 - a. Completion of the Release and Waiver of Liability Agreement for the Team/ Organization.
 - b. Agree to ensure there is ABSOLUTELY NO ALCOHOL on the Park premises at any time due to use of facilities by your group.
 - c. Acknowledge pending event, proof of insurance will be required. Some events may require additional insurances. Where Insurance is required, Proof of Insurance must be provided *at least 72 hours prior to event*. Failure to do so may result in cancellation of event. Recreation Coordinator will discuss specific insurance concerns & requirements with your group.
 - d. Have each team participants and/or parent sign a waiver of liability.
 - e. Ensure all areas are respected and maintained during use.
 - f. Inspection and cleanup area during and after use. Removal of all individual and team garbage when you leave.
 - g. Monday, Wednesday, and Sunday are designated for open floor time for all persons interested in using the Travis Solomon Memorial Lacrosse Box. No Reservations will be taken on these three days.

Equitable time and usage will be given to all.

I have read and agree to adhere to the above Terms of Agreement during my scheduled time at the Generations Park Complex.

Print Name

Signature

Date

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I,, on beha	alf of the
(Print Name)	(Organization Name)
hereby release the Saint Regis Mohawk Tribe	e, and their respective directors, officers, employees,
volunteers, agents, contractors, and representation	atives from any and all actions, claims, or demands
that I, my assignees, heirs, guardians, next of	kin, spouse and legal representatives now have, or
may have in the future, for injury, death, or pr	roperty damage, related to the use of the premises
of the Saint Regis Mohawk Tribe, the neglige	ence or other acts, whether directly connected to
these activities or not, and however caused, b	y any or the condition of the premises where these
activities occur.	
I also agree that I my assignees heirs guardi	and next of kin shouse and legal representatives

I also agree that I, my assignees, heirs, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any connection with any of the matters covered by the foregoing release. I also agree that the ______

(Organization Name)

shall indemnify the Saint Regis Mohawk Tribe from any claims of third parties who attend the event sponsored by the _____.

(Organization Name)

I hereby verify by my signature below that I have read and fully and understand each of the conditions of this release and Waiver of Liability Agreement for participating in and utilizing the property of the Saint Regis Mohawk Tribe and I accept each of the conditions of the Release and Waiver of Liability set forth above.

Signature

Date

Title/Organization/Team Representation

PARTICIPANT/PARENT OR LEGAL GUARDIAN RELEASE AND WAIVER OF LIABILITY AGREEMENT

WARNING: FIELD AND BOX SPORTS ARE DANGEROUS ACTIVITIES. BY ENGAGING IN SUCH ACTIVITIES AS FIELD AND BOX SPORTS, OR ANY ACTIVITY THAT IS CONSIDERED HIGH RISK, THE PARTICIPANT ACCEPTS THE RISK OF SERIOUS INJURY OR DEATH.

THIS IS A RELEASE OF LIABILITY—YOU MUST READ AND FULLY UNDERSTAND THIS BEFORE SIGNING. IF THE PARTICIPANT IS UNDER THE AGE OF 18, THE PARENT OR LEGAL GUARDIAN MUST SIGN THIS WAIVER.

Participant Name:				
Address:				
Address	City	State	ZIP	
Phone: ()	E-Mail Address:			

I, ______, for myself and on behalf of my/our heirs, assigns, personal representatives and next of kin, hereby acknowledge that I voluntarily have applied to participate and use the Generations Park Complex. I understand that the act of any sport necessarily involves known and unknown risks of injury to me and other people, which includes but is not limited to death, permanent or temporary paralysis, disability, illness or disease, physical or mental damage, or other injury, as well as damage to my equipment and personal property.

Some of these risks include the risks inherent in any such sport, such as falling and coming into contact with ramps and walls, latent or apparent defects or conditions in equipment or property, and passive or active negligent acts of myself, the sporting organization, officials and property owners.

I understand that the above list of risks is not complete or exhaustive and that those and other risks known or unknown, anticipated or unanticipated may also result in injury, death, illness, disease to myself or my property or other third parties. I voluntarily agree and promise to accept and assume responsibilities, and injuries, death, illness, disease or damage to myself or my property arising from my participation at any time while at the Generations Park Complex. I further understand that the Saint Regis Mohawk Tribe assumes no liability for loss, damage, or any kind of injury sustained by myself or my property while using any area of the Generations Park Complex.

I therefore assume all risks associated with using the Park, even if they arise from the negligence of the Saint Regis Mohawk Tribe. My participation at Generations Park Complex is voluntary and no one is forcing me to participate in spite of the risks. I understand the effect of this waiver and acceptance of risk on my legal rights.

FOR PARTICIPANTS UNDER 18 YEARS OF AGE

This is to certify that I, as a parent or guardian with legal responsibility for the above named participant, do consent and ratify his/her release of the Saint Regis Mohawk Tribe, and its officials and employees, and, for myself, my heirs, assigned, personal representatives and next of kin, I release and agree to indemnify the Saint Regis Mohawk Tribe, and its officials and employees from any and all liabilities incident to my minor child's involvement or participation at the Generations Park Complex as provided above, even if arising from the negligence of the Saint Regis Mohawk Tribe, and its officials and employees, to the fullest extent permitted by law. I have carefully read this release of liability and understand and fully agree with its contents.

Name of Parent/Guardian (Print)	Date of birth
Signature of Parent/Guardian	
Today's Date//	Phone ()

TEAM ROSTER

Team Name:	Date:
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# of Coaches:	Head Coach Name:
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Names of addition Coaches/Trainers: _____

No.	Player Name	Signature (Parental Signature required for minors)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

(Attach additional names if roster exceeds 20 participants)