



Baseball Field Reservation Form

The City of Oak Point has established a Policy for the Use of City Baseball Fields to coordinate and regulate the use of the City's baseball fields. In accordance with the Policy, field use is by reservation only. Due to the size of the fields, use of the baseball fields is also restricted to youth (12 years old and younger) play only. Teams may not reserve a field until a completed Baseball Field Reservation Form has been submitted to:

Oak Point City Hall
100 Naylor Road
Oak Point, Texas

The Baseball Field Reservation Form must be accompanied by Release of Liability forms for all of the players and coaches affiliated with the team and proof of liability insurance as required by the Policy. Reservations will be made at City Hall on a first come-first serve basis. Priority use of the fields will be given to Oak Point residents.

| | |
|--------------------|------------------|
| Team Contact _____ | Team Name _____ |
| Address _____ | City & Zip _____ |
| Home Ph# _____ | Work Ph# _____ |
| Mobile Ph# _____ | E-Mail _____ |

Field Reservation Requests (up to two reservations may be requested):

| | |
|--------------------------------------|--------------------------------------|
| Circle one: West Field or East Field | Circle one: West Field or East Field |
| Day _____ Time _____ | Day _____ Time _____ |

Is the team's coach or a player an Oak Point resident? Yes or No

If yes, what is the name and address of the coach or player?

Name _____

Address _____

Home Ph# _____

Team rosters and copies of utility bills or photo ID may be required by City staff to verify residency status.

I verify that the information on this Baseball Field Reservation Form is true and accurate. The provision of false or inaccurate information may result in the loss of a team's reservation privileges. I have read the City of Oak Point's Policy for the Use of City Baseball Fields and I agree to all provisions listed in the Policy. I will review the Policy with coaches, players, and spectators affiliated with my team.

Signature of Team Contact

Date

Note: In accordance with the Open Records Act, the information provided on this form may be released to the public upon request.

RELEASE OF LIABILITY

The undersigned "Participant" desires to participate in activities of the City of Oak Point, Texas (the "City"), relating to the use of the City's baseball fields. Parent or Guardian (hereinafter "Parent") and Participant recognize that there are risks, dangers and hazards inherent to all recreational activities. In consideration for the privilege of Participant's utilization of the City of Oak Point park and baseball fields (hereinafter "Jake's Place"), Parent and/or Participant acknowledge that any and all activities sponsored or conducted on the Jake's Place premises may result in personal injury, death, or property damage. For and in consideration of that participation, Parent and/or Participant willingly assume, accept, and agree to be fully responsible for the safety of the Participant, as well as any risk, while Participant participates in activities at Jake's Place.

With full knowledge of these risks, undersigned hereby agrees and has authority to fully release and hold harmless the City of Oak Point and any agents, directors, the Parks Board or City Council (hereinafter "the City") from any liability, claims, demands, or any causes of action, and not to sue or otherwise make any other claim against the City which may arise as a result of Participant's participation in activities on the premises of Jake's Place. I do hereby release, acquit and forever discharge the City, its officers, agents and employees from and against any and all liability, claims, actions, causes of action, lawsuits, cost, fees or expenses relating to or arising out of any and all injuries or damage which may result or arise from or out of my/our participation in such activities.

Parent and/or Participant intend this agreement to be effective whether or not any loss, property damage, injury, or death results from the negligence of the City. Parent and/or Participant understand that negligence means a failure to do an act that a reasonable careful person would do, under the same or similar circumstances, to protect himself, herself, or others from injury, loss, or death.

By signing this document Parent and/or Participant agrees to waive certain legal rights, including the right to sue. Parent and/or Participant have read, understand, and agree to the terms contained herein and acknowledge having had the opportunity to consult with legal counsel for further explanation or interpretation.

EXECUTED this the _____ day of _____, 20__.

SIGNATURE OF PARTICIPANT: _____

IF PARTICIPANT IS A MINOR,
SIGNATURE OF PARENT OR GUARDIAN: _____

SIGNATURE OF WITNESS: _____

Participant Information:

Participant Name: _____ Age: _____ M__ F__

Parent or Guardian Name (if Participant is a minor): _____

Address: _____ Phone: _____ Email: _____

Team Name: _____ Coach Name: _____