Sport Reservation Form

TODAY’S DATE: _____ / _____ / _____  Type of Sport Rental: __________________________

Payment and deposit for the room must be paid in full in order to hold the rental. A refundable security (damage) deposit is required for all room reservations.

Responsible Person: ______________________________________________________________

Address: _______________________________________________  City: __________________________  Zip: __________

(Use address list to verify residency)

Home Phone: __________________________  Secondary Phone: __________________________

Email Address: ________________________________________________________________

□ (Please check if applicable) Please email me information about upcoming Parks and Recreation opportunities and activities.

DATE OF EVENT: _______  TIME: FROM: _______ TO: _______

DATE OF EVENT: _______  TIME: FROM: _______ TO: _______

DATE OF EVENT: _______  TIME: FROM: _______ TO: _______

DATE OF EVENT: _______  TIME: FROM: _______ TO: _______  Facility: ________________

DATE OF EVENT: _______  TIME: FROM: _______ TO: _______

DATE OF EVENT: _______  TIME: FROM: _______ TO: _______

DATE OF EVENT: _______  TIME: FROM: _______ TO: _______

DATE OF EVENT: _______  TIME: FROM: _______ TO: _______

By signing this Rental Agreement, I confirm that I have read, fully understand, and agree to abide by all of the Bonner Springs Parks and Recreation Conditions, Rules and Regulations as set forth in the policy Rental Agreement which has been given to me and I in my possession. I further confirm by my signing this Rental Agreement that I will be present at all times during the function. I also understand that no release or refund of security deposit will be made until the Parks and Recreation Staff approves the condition cleanliness of the party room.

This agreement is invalid unless signed by both the Primary Renter and a Parks and Recreation Employee.

RENTER’S SIGNATURE: __________________________________________  DATE: ________________

AUTHORIZED BY: __________________________________________, PARKS AND RECREATION EMPLOYEE

OFFICE USE ONLY

□ Resident  □ Non-Resident

Rate:  Resident: $20  $30  $40  $60  
        Non-Resident $25  $35  $45  $65  x hours: ______ =Rental Fee: _______

Rental Fee: ______ + Volleyball Net: ______ + Deposit: $100 = Total Fee: _______

Date: ____/____/______  Receipt #: ____________  Cash _____  Check _____  Credit _____

Total Payment Amount: ____________  Amount Paid for Deposit: _______

Deposit repayment requested on: ___/___/_______  Summited by: _______