

Luray Parks and Recreation Department
45 East Main Street
Luray, Virginia 22835
(540) 743-6475

Application for Use of Public Buildings or Grounds

Date of Application: _____

1. Name of requested facility, ball field, or building: _____

2. Day(s) and Date(s) of requested use: _____

Time(s): _____

3. Activity/Event for which this is requested: _____

4. Name and address of the organization sponsoring this activity: _____

5. Title you hold in this organization: _____

6. Will the public be admitted to this activity? _____

7. Comments: _____

Notes: (1) It is understood that this application is submitted under the rules and procedures established by the Town of Luray. If approval is granted, the applicants agree to become responsible for any damages to the facility, buildings, or ball field(s).

(2) All final arrangements must be worked out with the Parks and Recreation Director.

(3) Absolutely no alcoholic beverages are permitted on park grounds.

(4) Responsible language is to be used at all times.

(5) All leagues using facilities must provide proof of liability insurance.

*****Failure to abide by the above regulations may result in forfeiture of park privileges*****

Statement of Waiver/Participant Agreement

I hereby, for myself, my heirs, and administrators, waive the release any and all rights and claims for damages I may have against the Luray Parks and Recreation Department, the Town of Luray, or any organization in whose buildings or grounds this activity is being held, and any instructors or person of these departments, for injuries received in participating in any activity sponsored by the Luray Parks and Recreation Department. I agree to abide by any and all rules, by-laws, and regulations set forth by the department. Failure to do so will result in disciplinary action at the discretion of the Recreation Director.

Signature of Applicant: _____ Printed Name: _____

Address: _____ Phone (home): _____ (Work): _____

Approval by Town Manager: _____ Date: _____

Approval of Parks and Recreation Director: _____ Date: _____

