

City of Albany
Department of Recreation
Facility Use Permit

Office Use Only
Date Issued _____
Permit # _____
Fee \$ _____

Permittee: _____
(Print name and title)

Facility: _____

Use: Softball Baseball Soccer Football
Rugby Other _____

Date: _____ From _____ am/pm To _____ am/pm

If date/time requested above is unavailable, alternate date(s)/time(s) requested:

Date: _____ From _____ am/pm To _____ am/pm

Date: _____ From _____ am/pm To _____ am/pm

IN CONSIDERATION for GRANTING A PERMIT for the use Of the above named Recreation Facility, the permittee, herein named, hereby agrees to and does indemnify and save harmless the City of Albany and the Department of Recreation of said City of Albany, of and from any loss, damage or injury incurred by reason of any injury to a person or property sustained by said permittee, any guest, attendant or user of said facility on the date(s) for which said permit is granted. This permit is granted under the conditions that the rules and regulations of the Department of Recreation are adhered to and is subject to revocation at any time on written demand of the Department of Recreation.

Permittee shall maintain adequate insurance approved by the City of Albany, naming the City of Albany as additional insured on a primary and non-contributing basis with respect to the use permitted herein. Permittee shall pay the required facility use fee within 24 hours of approval of this permit by the Department of Recreation.

Permittee _____ Phone#: Day _____ Night _____ Date _____
(Signature of authorized agent)

Permittee Address _____

City Agent _____ Title _____ Date _____

Return Completed Form to Department of Recreation, 7 Hoffman Ave., Albany, NY, 12209