



COLLEYVILLE PARKS AND RECREATION DEPARTMENT REAGAN BALL FIELD PARK RESERVATION

2512 Glade Road
Colleyville, Texas 76034
817.503.1180
817.503.1194 (Fax)
ColleyvillePARD.com

With my reservation of Reagan Park:

	<u>Residents</u>	<u>Non-Residents</u>	
<input type="checkbox"/> Baseball	No Lights \$35	No Lights \$60	
	Lights \$50	Lights \$100	
<input type="checkbox"/> Softball	No Lights \$35	No Lights \$60	
	Lights \$50	Lights \$100	

I hereby assume that this property will be under my care, custody, and control on the following date and time listed below:

Reservation Date: _____ Reservation Time (2 hours): _____

Team Name: _____ Number of attendees: _____

Will you require lights? _____ At this time I am leaving a \$ _____ reservation fee.

I understand and will comply with no **alcoholic beverages** allowed.
 I agree to clean-up and **dispose of all litter** properly, immediately after use.
 I agree to reimburse the City for any and all damages incurred during reservation time and date.
 I agree to release, absolve, indemnify and hold harmless the City of Colleyville, its employees, officials and all others arising out of this reservation agreement.

Name (please print): _____ DOB _____ Address: _____ City: _____ Zip: _____ Day Time Phone #: _____ Evening Phone #: _____ Email: _____ Signature: _____	Emergency Contact Information (outside of home) Name _____ _____ Relation _____ Phone # _____
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Refunds are available due to inclement weather, provided however, that a request for a refund is submitted to the Parks and Recreation Department, in writing, within one week of scheduled session. Failure to submit a timely request for a refund forfeits the refund. Rescheduling in lieu of a refund is permitted based upon availability of time slots. If there is a red flag on the park entry sign, the fields are closed due to inclement weather.

 Credit Card Number: _____
 Exp. Date: _____ Security Code: _____
 Cardholder Name (please print) _____
 Cardholder Signature _____