Shelter Reservation Form

Bonner Springs Parks and Recreation

This is an official notice from the Bonner Springs Parks and Recreation Department that the person below has exclusive use of the named shelter for the hours indicated.
If an issue arises, please call 913-422-7010 and explain the Recreation & Facilities Assistant, Teresa McCullough, what facility you have reserved and what the issue is.

Shelter Facility _____**Lions Park Gazebo** _____**Lions Rear Shelter** _____**North Park**

_____ **South Park** _____ **Kerry Roberts** _____ **Kelly Murphy**

Date of Reservation: _____ /_____ /_____ **Day of the week:** _____

Type of Event: _____

Time of Reservation:

8:00am-12:00pm_____ **1:00pm-5:00pm**_____ **6:00pm-10:00pm**_____

Responsible Person: _____ **Phone Number**: _____

Address: _____ **City:** _____ **Zip:** _____
(Use address list to verify residency)

Email Address: _____

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

Cancelation Policy

The fee schedules for cancelations are as follows:

Processing fee - $5

a) Cancelation must be **at least 15 days** in advance to receive total refund minus the processing fee
b) Cancellations **14 days or less** will forfeit entire amount paid- **No Refund**

Rental Information- Please Check or Initial the following:

_____All rentals are at 4 hour time slots 8:00am-12:00pm, 1:00pm-5:00pm, or 6:00pm-10:00pm.

- If you require additional time, you will be required to rent the extra 4 hour time slot.

_____All rentals are rain or shine; please refer to cancelation policy for all other inquiries.

_____ Rentals are for the shelters, the park is open to the public.

I HAVE READ, UNDERSTAND, AND AGREE TO THE FOLLOWING:

IN CONSIDERATION OF MY BEING ABLE TO USE THE FACILITIES OF THE CITY OF BONNER SPRINGS FOR MY PROGRAM, AND FOR AND ON BEHALF OF MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS, PERSONAL REPRESENTATIVES AND ASSIGNS, I DO HEREBY WAIVE ALL CLAIMS FOR DAMAGE OR LOSS TO MY PERSON/PROPERTY AND ALL DEMANDS AND LIABILITY WHICH MAY BE CAUSED BY ANY ACT OR FAILURE TO ACT OF AND BY, AND I DO HEREBY RELEASE, DISCHARGE, AND HOLD HARMLESS, THE CITY OF BONNER SPRINGS, KANSAS, THE OWNERS, MANAGERS, AND LEASEES OF ANY REAL PROPERTY ON WHICH SUCH PROGRAM MAY BE CARRIED ON, AND THEIR RESPECTIVE OFFICERS, BOARD MEMBERS, EMPLOYEES, AGENTS, INSTRUCTORS, CONTRIBUTORS TO SUCH PROGRAMS AND TRUSTEES OF AND FROM ANY AND ALL SUCH CLAIMS, DEMANDS, LOSS, DAMAGE, AND LIABILITY ALL OF WHICH ARISE OUT OF OR IN CONNECTION WITH MY PARTICIPATION IN THIS PROGRAM AND FACILITY. I DO FURTHER UNDERSTAND AND AGREE THAT THE ABUSE OR MISUSE OF ANY CITY FACILITY, OR VIOLATION OF ANY ESTABLISHED RULES AND REGULATIONS OF CITY FACILITY, CAN RESULT IN THE CANCELLING OF A FACILITY RESERVATION AND/OR REFUSING THE USE AT ANY TIME, NOW OR IN THE FUTURE.

_____ _____

Signature of renter Printed name of renter

OFFICE USE ONLY ☐ **Resident** ☐ **Non-Resident**

Date: ____/_____/____ **Receipt #:** _____ **Cash** _____**Check** _____ **Credit**_____

Payment Amount: _____ **Staff Making Reservation:** _____