

City of
WALCOTT

1128 W. Lincoln Street - P.O. Box 217 - Walcott, IA 52773
Phone 563-281-6571 Fax 563-281-6287

WALCOTT PARK SHELTER/GAZEBO USERS
RESERVATION & HOLD-HARMLESS WAIVER OF LIABILITY AGREEMENT
NON-REFUNDABLE RESERVATION FEE - \$35

_____	Park - Victory – Wescott – Prairie View- Welcome (circle one)	
Name		
_____	Shelter ----- North ----- South-----Gazebo (circle one)	
Address		
_____	_____	_____
Telephone #	Reservation date	Reservation time
_____		_____
Specific activity for which shelter is to be reserved	Approximate # of people	

The above listed party hereby agrees to the following:

- I (we) shall immediately reimburse the City for any damages that may occur to the shelter/gazebo and/or surrounding area arising out of the use of the shelter/gazebo and/or surrounding area during the time that the shelter is reserved.
- I (we) shall at all times adhere to the rules, regulations and laws of the City of Walcott and the State of Iowa which govern such activities and/or use of said public property.

Further, the above listed party and any person(s) claiming through or under the undersigned, covenant and agree to protect, indemnify, and hold harmless the CITY OF WALCOTT, IA, its departments, agents, employees, and assigns from any and all actions, claims, demands for damages, expenses, (including attorney's fees), or liability of any kind or nature whatsoever, which may be occasioned by or arising out of any accident or other occurrence causing or inflicting injury and/or damage to any person(s) or injury and/or damage to property, which may result from the use of a park shelter/gazebo and the surrounding park grounds.

NOT ALLOWED IN CITY PARKS:

- **DOGS**
- **SMOKING OR VAPING**
- **INFLATABLE BOUNCE HOUSES**

_____	_____
Today's Date	Signature

THE CITY OF WALCOTT RESERVES THE RIGHT TO TERMINATE THIS RESERVATION AND THE RIGHTS CONFERRED HERewith AT ANY TIME FOR ANY VIOLATION OF THE RULES AND REGULATIONS GOVERNING THE USE OF THESE FACILITIES AND/OR ANY VIOLATION OF ANY LOCAL, STATE, OR FEDERAL STATUE.

(for office use only)

_____ or EXEMPT _____
Date fee paid City Initials