



Bertie County Recreation Department

PO Box 530

Windsor, NC 27983

252-794-5363 fax 252-794-5362

Applicants Name: _____

Organization: _____

Address: _____ City _____ Zip _____

Person Responsible: _____

Work Phone: _____ Cell Phone: _____

Home Phone: _____ Fax: _____

Email: _____

Date Requested: _____

Time From: _____ to _____

****Times must include setup & cleanup times of the facility.**

Facility/Fields to be used: _____

Reason for use of facility/field _____

By the execution of this application for the use of the requested Bertie County Recreation Department facility, we, the undersigned whether one or more, agree to abide by all the rules pertaining to the use of the facility. We hereby release and forever discharge Bertie County Recreation Department, and its agents, directors, officers and employees from any kind or nature of liability whatsoever arising out of or related to any loss, damage or injury that may be sustained by any participant(s) or any property of the participant(s) while participating in the activity or occupying the facility. This release shall be binding upon personal representatives, guardians, heirs, parents, next of kin, executors, and the administration of participants.

We agree to leave the Bertie County Recreation Department facility in the same condition in which it was rented to us, and we agree to be responsible for any damages to the said facility.

Bertie County Recreation Department is authorized to seek and give consent for emergency medical treatment for the participant(s) if deemed necessary. It is understood that Bertie County Recreation Department provides no health, medical, or accident insurance for participants or renters.

I have read the above Responsibility Release, and agree to follow the Bertie County Recreation Department rental policies (a copy of which is attached hereto).

Signature _____

Printed Name: _____

Staff Use Only
Fee for use of facility/field: _____ Date Paid: _____
Received By: _____