

APPLICATION FOR USE OF PROPERTY AND/OR FACILITIES



CITY OF LIBERTY
206 W. Front St.
Liberty, SC 29657

www.libertysc.com

Recreation Center Phone
(864)843-7360

Austin Lynch
Recreation Director
Liberty Recreation Center
318 W. Main St./PO Box 716
Liberty, SC 29657

PLEASE PRINT

Individual's name \_\_\_\_\_ Date application rec'd \_\_\_\_\_

Full mailing address \_\_\_\_\_

Telephone Numbers ( ) - ( ) - ( ) - \_\_\_\_\_

Email address \_\_\_\_\_

NAME OF ORGANIZATION

Full mailing address \_\_\_\_\_

Full physical address \_\_\_\_\_

Activity or nature of rental \_\_\_\_\_

Facilities you are requesting \_\_\_\_\_

Approximate attendance \_\_\_\_\_

Beginning & Ending DATES \_\_\_\_\_ (Beginning) \_\_\_\_\_ (Ending)

How many DAYS and HOURS \_\_\_\_ (Days) \_\_\_\_ (Hours)

Proof of general liability insurance is required, naming the City of Liberty as an additional insured for this event. You may use the TULIP (Tenant Users Liability Insurance Program) program to purchase competitively priced insurance for this event. Go to http://www.ebi-ins.com/tulip and enter 0501-684 when asked for the Entity ID code. Answer the questions and you will receive a quote for this insurance. If you would like to proceed with purchasing the insurance, you may do so with a credit card. A certificate of Insurance will be emailed to you and the City of Liberty. For help, call 1-800-507-8414.

I personally accept the responsibility to observe all regulations concerning the use of this facility. I understand that the fee will be \$ \_\_\_\_\_ and is payable in advance, with this application.

Signature Title Date

For Office Use

Authorized Signature Title Date