

# LISBON RECREATION DEPARTMENT

## Field Schedule Requirements

**Four fields available in Lisbon City Park for scheduling practices and games:**

***Recommended usage for each field:***

Field #1 – Elementary/Jr High Baseball Field

Field #2 – Elementary/Jr High Baseball/High School Baseball Field

Field #3 – Elementary/Jr High Softball Field/High School Softball Field

Field #4 - Elementary/Jr High Softball or Elementary Baseball Field

- Reservation and scheduling priority:
  1. High School Baseball/Softball Practices and Games
  2. Lisbon Park and Recreation Teams
  3. Community and Club teams
- Teams must have proof of insurance, provided at the same time fees are paid
- 2 practice reservations and 1 game reservation allowed per 7 days
- Practice requests for April/May in increments of 1.5 hours
- Practice requests for June/July in increments of 1.5 hours
- Reservations for field practice schedules are to be made by the second Monday in March for April/May and the second Monday in May for June/July at 10AM – If weather works out for March practices, individual requests can be made during that month
- Email sent to [lisbonparkandrecdir@gmail.com](mailto:lisbonparkandrecdir@gmail.com)
  - Allow 12-24 hours for email response from Park and Recreation Director
  - Reservation considerations taken in order received by priority group listed above
- Once all requests are granted on the second Monday of the month, additional field space may be reserved

**Remember....The City Park Fields are for  
anyone to play on**

# LISBON RECREATION DEPARTMENT

## Game Schedule Field Use Agreement

CITY OF LISBON

115 N. Washington

Lisbon, IA 52253

Phone: (319)455-2459

Fax: (319)455-2470

FEES: \$150 for Community/Club teams for practice time (includes lights if necessary, field prep – excluding marking) (\$250 for Community/Club teams for tournaments (including lights if necessary, equipment for field prep, and concession stand.)

Name of Group/Individual: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Type of Activity: \_\_\_\_\_

### **Must provide proof of insurance prior to field scheduling.**

- **Indemnity.** Any Group or Individual named above using the ball fields agrees to indemnify and hold harmless the City of Lisbon for any and all claims, damages or injuries, including attorney's fees and costs, made against or sustained by the City of Lisbon whether directly or indirectly as a result of the above named Group's or Individual's use of the ball fields and its facilities.
- **Insurance.** The Group or Individual named above agrees to have in place a liability insurance policy with minimum limits of \$1,000,000.00, that includes contractual liability and participant coverage. A copy of a proof of insurance shall be included with Field Use Agreement.
- **Tournament schedule is due to the Recreation Director at least 30 days prior to event.** This ensures adequate employee scheduling.
- **All concession/restroom use must be approved through the Park and Recreation Department.**
- **Facility Reservations** may be changed, rescheduled or cancelled by the Recreation Department staff if the situation deems it necessary. The staff will give as much notice as possible. Deposits and reservation fees will be refunded. The City or its staff is not responsible for any losses that may result in the event of a change, rescheduling or cancellation of an event reservation. Rental fees will not be refunded to those applicants who fail to give at least 48 hours cancellation notice to the Recreation Director. Facility reservations are given on a first come, first served basis after Lisbon Community School District and City Recreation Department practices and games are scheduled.

**I have read the above and fully understand the content and potential risks and associated costs.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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**LISBON PARKS & RECREATION STAFF:**

- Date Application Received: \_\_\_\_\_ Time Received: \_\_\_\_\_ AM/PM
- Date Paid: \_\_\_\_\_ Cash CC Check # \_\_\_\_\_
- Proof of Insurance Needed? Yes \_\_\_ No \_\_\_ Date Received: \_\_\_\_\_
- Comments: \_\_\_\_\_  
\_\_\_\_\_
- Reviewed By: \_\_\_\_\_