



Rolling Hills County Park

Disc Golf Tournament Application

Application must be submitted to at least four (4) weeks prior to the requested event date.
Please note that all vehicles associated with the event will be subject to vehicle fees to access the park.

EVENT INFORMATION

Name of Group	First and Last Name of Event Coordinator		
Phone Number	Email Address		
Address	City	State	Zip Code
Disc Golf Tournament Name	Event Date		
Arrival Time	Departure Time		
Course for Tournament	<input type="checkbox"/> OG (Main) <input type="checkbox"/> The Foz <input type="checkbox"/> The Labyrinth		
Description of Event (Background on how the event will be conducted)			
List items brought in for tournament <i>WCPARC prohibits a variety of outside material/items. To avoid disappointment, list any items included in the event (this can be as simple as a canopy)</i>			
Event Schedule			

FEES

Day tournament	<input type="checkbox"/> \$100.00 Flat Fee
Glow tournament (<i>Must be out of the park by midnight</i>)	<input type="checkbox"/> \$175.00 Flat Fee
Early Arrival <i>if applicable</i> (Park opens at 8:00am)	\$25.00 per hour x _____ hours = \$_____
Late Stay <i>if applicable</i> (Excludes glow tournaments) Memorial Day Weekend through Labor Day: Park closes at 9:00pm. Day after Labor Day until Memorial Day Weekend: Park closes at dusk.	\$25.00 per hour x _____ hours = \$_____
Credit Card #: _____	Expiration Date: _____
Billing Zip: _____	Total Fee \$ _____

RELEASE OF LIABILITY

The above organization shall indemnify Washtenaw County and Washtenaw County Parks and Recreation Commission (WCPARC), their commissioners, employees, volunteers and agents, and hold them harmless from and against any and all loss, damages, liability, claims, actions, suits, proceedings of every kind or character arising out of injury, including death, to persons or damage to property due in whole or in part to the organization's special event.

Event Coordinator Signature	Date
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FOR OFFICE USE ONLY

Date Received	Received By (Initials)	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Payment Processed Date	Payment Received <input type="checkbox"/> Cash <input type="checkbox"/> CC. Authorization # _____	Date in RecTrac