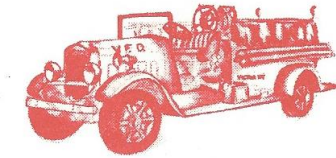


Victor Fire Department, Inc.



34 Maple Avenue • Victor, New York 14564

Fireman's Field Usage Request Form

Application Date: _____

Name of Organization: _____

Organization Address: _____

Contact Person: _____

Contact Person Phone: _____ Email: _____

Date(s) & Hours Requested: _____

Brief Description of Use or Event: _____

*Renter is responsible for any and all damages arising out of the use of the field.

*All New York drinking laws apply and are the sole responsibility of the Renter to enforce.

*Renter hereby indemnifies and holds harmless the Victor Fire Department, Inc., its members, officers, agents and employees from and on account of any injury to persons, including wrongful death, and/or property arising out of or in any way due to Renter's use of the field.

Signature of Applicant

Date

For Office Use Only:

Certification of Insurance attached: _____ Yes _____ No

Fee Paid: _____ Yes _____ No

Approval of Request is Granted _____ Denied _____ by Membership

Department Secretary Signature

Date