Remington Community Development District

Ball Field Reservation Form

Name: _____
(Resident)

Residential Address: _____ **FL** _____
(Within Remington CDD) *Street Address* *City* *State* *ZIP Code*

Mailing Address: _____
(If different from Residential) *Street Address* *City* *State* *ZIP Code*

Phone: _____ Email: _____

Date(s) of Reservation: _____ Time to be Reserved: _____ to _____
(2 hours maximum)

Number of Residents: _____ Number of Non-Resident Guests: _____

Reason for Renting: _____

WAIVER:
On behalf of myself and any guests attending this event, I/we understand that the Remington Community Development District assumes no responsibility for injuries or illness that I/we may sustain as a result of physical condition or resulting from participation in any activities, sports, use of exercise equipment, or other activities. I/we expressly acknowledge on behalf of myself and my guests that I/we assume the risk for any and all injuries and illness that may result from participation in these activities. I/we hereby release and discharge the Remington Community Development District, its agents, servants, and employees from any claims for injury, illness, death, loss or damage that I/we may suffer as a result of participation in these activities. I/we understand that Remington Community Development District are not responsible for personal property lost or stolen while participating at the Remington Recreation Center, pool and sports facilities.

Signature: _____ Date: _____
(Resident)

PLEASE MAIL THIS FORM AND PAYMENTS TO:
Remington CDD
Attn: Ball Field Reservation
219 E Livingston St
Orlando, FL 32801

PRICING:
Rental Fee: $25.00
(per group per 2-hour block of time)

FOR OFFICE USE ONLY:
Rental fee of: _____ paid on: _____ via check number _____