

POLAND MUNICIPAL FOREST

308 MAIN STREET
POLAND, OHIO 44514

PERMITS & WAIVERS

Applicant: _____

Date: _____

Address _____

Phone _____

Date of Event _____

Time of Event _____

Special Use Permit is: Approved _____ Denied _____ Canceled _____

_____ Conditional upon receipt of:

_____ Performance Guarantee Deposit

_____ Evidence of Insurance

_____ Waiver _____

_____ Other _____

Poland Forest Representative signature

Permit# _____

Description of special use/event activity:

Municipal Forest location: _____

Activity approval date: _____

Coordinate detailed arrangements with Forest Chairperson: _____ Phone: _____

Please carry a copy of this permit when the event is occurring.

CC: Village Council
Forest Chairperson

POLAND MUNICIPAL FOREST

CONCERNS / RESTRICTIONS:

PERMIT# _____

1. _____

2. _____

3. _____

4. _____

5. _____

6. Participants shall be aware of and recognize the rights of others using the same areas in the Poland Municipal Forest.

A copy of this permit must be carried when special use of Forest occurs.

POLAND MUNICIPAL FOREST

WAIVER

I, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, voluntarily assume all risks of accident or injury and release and forever discharge the Village of Poland, Poland Municipal Forest, and its employees, officers, and agents, from any and all liability for personal injury or property damage of any kind sustained the Poland Municipal Forest during the _____ project whether such personal injury or property damage is caused by the negligence of the Village of Poland, Poland Municipal Forest, or its employees, officers, or agents, or otherwise.

I further covenant and agree to indemnify and hold harmless the Village of Poland, and the Poland Municipal Forest, its employees, officer and agents, from all loss and expenses, including but not limited to, damages, legal expenses and cost of defense, in any manner from my use of the Poland Municipal Forest.

Signature by the participant below indicates they have read and agree with the Poland Village and Poland Municipal Forest Liability Waiver.

Participant signature

Date

Participant (print name)

Parent or legal guardian signature
(if participant is under 18 years of age)

Date

Parent or legal guardian (print name)