



Program Proposal Application

(Revised December 2024)

APPLICANT INFORMATION

ORGANIZATION/INDIVIUDAL NAME: _____

PRIMARY CONTACT: _____

WEBSITE: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: WORK: _____ HOME: _____

CELL: _____ FAX: _____

EMAIL: _____

PROGRAM DETAILS

PROGRAM TITLE: _____

PROGRAM TYPE:

Athletic League		Fitness		Camps		Music	
Arts/Crafts		Educational		Water Recreation		Other	

PROGRAM LOCATION:

Drakes Creek		Memorial		Sanders Ferry		Veterans	
Heritage Park		Volunteer Park		Rugby park		Other	

TYPE OF FACILITY NEEDED:

Baseball/Softball Field		Multipurpose Field		Inline Rinks		Tennis Courts	
Greenspace		Shelters		Playgrounds		Other	

AGE OF PARTICIPANTS:

Preschool (Ages 3-5)		Youth (Ages 6-11)		Pre-Teen (Ages 12-13)		Teen (Ages 14-18)	
Adult (Ages 19 & up)		Senior (Ages 50 & Up)		All Ages		Other	

PROGRAM / LEAGUE DETAILS:

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY SUNDAY

PROPOSED START AND END DATE: _____

PROPOSED DAY(S) AND TIME(S) THE PROGRAM WOULD MEET: _____

TOTAL ATTENDANCE: MIN #: _____ MAX #: _____

Will the Parks Department be expected to provide extra maintenance or supplies for the program? NO YES
If YES, provide details: _____

PROGRAM DESCRIPTION:

GIVE A BRIEF DESCRIPTION OF THE PROGRAM: _____

LIST THE BENEFITS THIS PROGRAM WILL PROVIDE IT'S PARTICPANTS: _____

SAFETY & EMERGENCY FACTORS:

RAIN/CANCELLATION POLICY: Is there a rain policy for your program? If yes, please give a brief description along with optional date(s) and time(s) _____

List any safety, health, and/or risk factors for this program and how this information will be presented to participants: _____

PROGRAM FINANCIALS:

WILL THERE BE A FEE CHARGED FOR THIS PROGRAM? NO YES AMOUNT _____

IS THIS PROGRAM: FOR PROFIT NOT FOR PROFIT CHARITABLE FUNDRAISER

Must provide legal documentation for non-profit organizations or a business license.

PLEASE RESPOND TO EACH OF THE FOLLOWING:

I understand the ORGANIZATION/INDIVIDUAL will be expected to abide by the Hendersonville Parks Department "Facility Use Agreement. NO YES

I understand the ORGANIZATION/INDIVIDUAL will be expected to contribute an annual donation or fee to the Parks or local non-profit organization. All fees will be determined by the Parks Department and Parks Board.
 NO YES

PLEASE LIST PARKS OR LOCAL NON-PROFIT TO RECEIVE DONATION AND AMONUT: _____
(EXAMPLES: \$500 DONATION PER SEASON TO LOCAL HOCKEY LEAGUE; \$1000 TO MARY'S MAGICAL PLAYGROUND)

*Note – If Program requires reservation of Shelter(s), the program will be subject to shelter reservation at regular rates per hour.

I understand that I may be required to provide a current certificate of insurance naming the City of Hendersonville as an "additional insured" and accept all responsibility. NO YES

I understand that I will not be considered a regular employee of the City of Hendersonville, but shall be considered an independent program provider and, as such, will not be entitled any benefits afforded to regular wage employees of the City of Hendersonville. NO YES

I understand that I will be responsible for informing the City of Hendersonville and all participants of risks involved with participation and/or use of equipment and supplies. NO YES

HOLD HARMLESS CLAUSE

Program organizer shall save and hold the City of Hendersonville and the Hendersonville Parks and Recreation Department harmless from and against all liability, claims and demands on account of personal injuries (including without limitation to the foregoing worker's compensation and death claims) or property loss or damage of any kind whatsoever, which arises out of or be in any manner connected with the performance of this contract, regardless of whether such injury, loss, or damage shall be caused by, or be claimed to be cause, by the negligence of the permit holder or the City of Hendersonville and Hendersonville Parks and Recreation Department; or by any agents or employees of any of the foregoing; or by accident; or otherwise. If application is approved, the program organizer is responsible to adhere to all rules and regulations as set forth in the Hendersonville Municipal Code. A copy of these regulations is available at City Hall or on the City's website.

The undersigned agrees to the terms of this agreement as outlined by the City of Hendersonville Parks and Recreation Department.

Signature Date

OFFICE USE ONLY

APPLICATION RECEIVED: _____ PARKS BOARD REVIEWED: _____

FINAL APPROVAL DATE: _____ STAFF SIGNATURE: _____