



# Application for Orienteering Permit



Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

What park(s) would you like to do Orienteering in? \_\_\_\_\_

Please describe the route and impact of the orienteering (# of people, # of visits to site, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do not write in this box**

Coordinates of Route Starting and End Point(s): \_\_\_\_\_

Management unit(s) of Route: \_\_\_\_\_

### **Orienteer must notify Natural Area Preservation of any changes in site or route of event.**

*This permit may be revoked at any time. This permit is valid only for the site and route listed above and is non-transferable.*

*Questions should be directed to Natural Area Preservation staff, 1831 Traver Rd., Ann Arbor, MI 48105. Call (734) 794.6627*

Statement of Liability: Permittee hereby releases, waives, discharges, and covenants not to sue the City of Ann Arbor, its departments, officers, employees and agents, from any and all liability to Permittee, its officers, employees and agents, for all losses, injury, death or damage, and any claims or demands therefore, on account of injury to person or property, or resulting in death of Permittee, its officers, employees or agents, whether caused by the City of Ann Arbor, its departments, officers, employees or agents.

Statement of Indemnification: Permittee hereby covenants and agrees to indemnify and save harmless, the City of Ann Arbor, its departments, officers, employees and agents, from any and all claims and demands, for all loss, injury, death or damage, that any person or entity may, in any manner, arising out of any occurrence related to (1) this permit; (2) the activities authorized by this permit; and (3) the use of occupancy of the premises which are the subject of this permit, as well as any other city-owned lands. This indemnification and save harmless agreement shall extend to all loss, injury, death or damage, proximately caused or arising out of the negligence of the City of Ann Arbor, its departments, officers, employees and agents.

I have read the conditions governing this permit and the accompanying guidelines and agree to abide by them in the conduct of my operations under this permit.

\_\_\_\_\_  
**Permittee Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Department Representative**

\_\_\_\_\_  
**Date**