



FACILITY SALES RECEIPT

Receipt # 1948613
Payment Date: 09/27/20
Household: 22433

Online Payment
 Community Services Department
 4404 Burns Road
 Palm Beach Gardens FL 33410
 Phone: (561)630-1100
 http://www.pbgrec.com

Trey Burlingame
 310 Fairway North
 Tequesta FL 33469
 treyburlingame@gmail.com

Hm Ph: (561)628-9391

Reservation Details: Lilac Park, Lilac Multi-purp 1

		<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact:	Trey Burlingame	132.79	132.79	132.79	132.79	0.00
Phone Number:	(561)628-9391					
Reserv. Number:	37518					
Status:	Firm					
Purpose:	Girls Travel lacrosse Practice					
Date(s):	Tue @ 5:00 pm - 7:00 pm: 10/6					
Special Questions:	Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmanix.co How many people (spectators included) do you expect to attend? 40 Please list any other comments or questions for staff to consider while reviewing this permit request.:					

Reservee: Trey Burlingame, Burlingame Sports Inc

I have read, understand, and agree to comply to the City's Facility Use Policies and Procedures. I understand that, if I am granted a permit, I am responsible for all participants of the permitted activity understanding the Facility Use Policies and Procedures as well. Further, I understand that I am responsible for the actions of the participants of the activity.

I understand that the City's COVID-19 waiver (click here to view waiver language) will be attached to the permit application receipt. I attest that it is my duty to ensure all participants (players, referees, spectators, coaches, etc.) of the permitted activity have signed the waiver prior to arriving at any City of Palm Beach Gardens facility. I understand that it is my duty to make copies of the form, as needed. I understand that any and all participant waivers must be made available to the City upon request. If at any point the permit holder is found not in compliance with this requirement, all permits are null and void.

For programs with youth participants I agree to require the Parent(s) and/or Guardian(s) of all program participants to execute the COVID-19 Waiver and Assumption of Release, attached hereto. Execution of the COVID-19 Waiver and Assumption of Release by the Parent(s) and/or Guardian(s) of program participants constitutes a material inducement for the City to enter into this City Facility Use Permit. Accordingly, failure to have the the COVID-19 Waiver and Assumption of Release properly and timely executed shall constitute a material breach of this Agreement.

Reservation Details: Lilac Park, Lilac Multi-purp 1

		<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact:	Trey Burlingame	132.79	132.79	132.79	132.79	0.00
Phone Number:	(561)628-9391					
Reserv. Number:	37519					
Status:	Firm					
Purpose:	Girls travel lacrosse practice					
Date(s):	Thu @ 5:00 pm - 7:00 pm: 10/8					
Special Questions:	Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmanix.co How many people (spectators included) do you expect to attend? 40 Please list any other comments or questions for staff to consider while reviewing this permit request.:					

FACILITY SALES RECEIPT



Receipt # 1948613
Payment Date: 09/27/2020
Household: 22433

Reservation Details: Lilac Park, Lilac Multi-purp 1

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact:					
Phone Number:					
Reserv. Number:					
Status:					
Purpose:					
Date(s):					
Special Questions:					

Trey Burlingame
(561)628-9391
37520
Firm
Girls Travel Lacrosse practice

Tue @ 5:00 pm - 7:00 pm: 10/13
Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC
Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmaniax.co
How many people (spectators included) do you expect to attend? 40
Please list any other comments or questions for staff to consider while reviewing this permit request.:

Reservation Details: Lilac Park, Lilac Multi-purp 1

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact:					
Phone Number:					
Reserv. Number:					
Status:					
Purpose:					
Date(s):					
Special Questions:					

Trey Burlingame
(561)628-9391
37521
Firm
Girls Travel Lacrosse practice

Thu @ 5:00 pm - 7:00 pm: 10/15
Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC
Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmaniax.co
How many people (spectators included) do you expect to attend? 40
Please list any other comments or questions for staff to consider while reviewing this permit request.:

Reservation Details: Lilac Park, Lilac Multi-purp 1

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact:					
Phone Number:					
Reserv. Number:					
Status:					
Purpose:					
Date(s):					
Special Questions:					

Trey Burlingame
(561)628-9391
37522
Firm
Girls Travel Lacrosse practice

Tue @ 5:00 pm - 7:00 pm: 10/20
Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC
Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmaniax.co
How many people (spectators included) do you expect to attend? 40
Please list any other comments or questions for staff to consider while reviewing this permit request.:

Reservation Details: Lilac Park, Lilac Multi-purp 1

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact:					
Phone Number:					
Reserv. Number:					
Status:					
Purpose:					
Date(s):					
Special Questions:					

Trey Burlingame
(561)628-9391
37523
Firm
Girls Travel Lacrosse practice

Thu @ 5:00 pm - 7:00 pm: 10/22
Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC
Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmaniax.co
How many people (spectators included) do you expect to attend? 40
Please list any other comments or questions for staff to consider while reviewing this permit request.:

FACILITY SALES RECEIPT



Receipt # **1948613**
Payment Date: **09/27/2020**
Household: **22433**

Reservation Details: Lilac Park, Lilac Multi-purp 1

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact: Trey Burlingame	132.79	132.79	132.79	132.79	0.00
Phone Number: (561)628-9391					
Reserv. Number: 37524					
Status: Firm					
Purpose: Girls Travel Lacrosse practice					
Date(s): Tue @ 5:00 pm - 7:00 pm: 10/27					
Special Questions:	Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmaniax.co How many people (spectators included) do you expect to attend? 40 Please list any other comments or questions for staff to consider while reviewing this permit request.:				

Reservation Details: Lilac Park, Lilac Multi-purp 1

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact: Trey Burlingame	132.79	132.79	132.79	132.79	0.00
Phone Number: (561)628-9391					
Reserv. Number: 37525					
Status: Firm					
Purpose: Girls Travel Lacrosse practice					
Date(s): Thu @ 5:00 pm - 7:00 pm: 10/29					
Special Questions:	Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmaniax.co How many people (spectators included) do you expect to attend? 40 Please list any other comments or questions for staff to consider while reviewing this permit request.:				

Reservation Details: Lilac Park, Lilac Multi-purp 1

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact: Trey Burlingame	132.79	132.79	132.79	132.79	0.00
Phone Number: (561)628-9391					
Reserv. Number: 37526					
Status: Firm					
Purpose: Girls Travel Lacrosse practice					
Date(s): Thu @ 5:00 pm - 7:00 pm: 11/5					
Special Questions:	Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmaniax.co How many people (spectators included) do you expect to attend? 40 Please list any other comments or questions for staff to consider while reviewing this permit request.:				

Reservation Details: Lilac Park, Lilac Multi-purp 1

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Reserv. Contact: Trey Burlingame	160.08	160.08	160.08	160.08	0.00
Phone Number: (561)628-9391					
Reserv. Number: 37527					
Status: Firm					
Purpose: Girls Travel Lacrosse practice					
Date(s): Tue @ 5:00 pm - 7:00 pm: 11/10					
Special Questions:	Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmaniax.co How many people (spectators included) do you expect to attend? 40 Please list any other comments or questions for staff to consider while reviewing this permit request.:				

FACILITY SALES RECEIPT



Receipt # 1948613
Payment Date: 09/27/2020
Household: 22433

Reservation Details: Lilac Park, Lilac Multi-purp 1

Reserv. Contact: **Trey Burlingame**
 Phone Number: **(561)628-9391**
 Reserv. Number: **37529**
 Status: **Permit - In Review**
 Purpose: **Girls Travel Lacrosse practice**

	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Deposit:	1.00	1.00	1.00	1.00	0.00

Date(s): Thu @ 5:00 pm - 7:00 pm: 11/12, 11/19
 Special Questions: Please enter the company or organization name. Enter N/A if this does not apply.: Lax Maniax LLC
 What type of permit are you requesting? Please refer to the Facility Use Policies & Procedures for definitions.: Block
 Please enter the email address for the permit applicant. Email will be the primary form of communication from our staff.: trey.burlingame@laxmanix.co
 How many people (spectators included) do you expect to attend? 40
 Please list any other comments or questions for staff to consider while reviewing this permit request.:

Processed on 09/27/20 @ 3:43 pm by WWW

Total New Deposit Fees	1.00
Total New Fees	1,266.50
Discount Applied	0.00
Total New Taxes	88.69
Total Due	1,356.19
Total Deposit Fees Paid	1.00
Total Fees Paid	1,266.50
Total Taxes Paid	88.69
Total Paid	1,356.19

Household Balance Information

Overall Household Credit Balance Available 0.00
 Overall Household Balance Due 0.00

Payment of: 1,320.35 Made By: CREDIT CARD Auth: 00096G Card#: xxxxxxxxxxxx3514 With Reference:
 Payment of: 35.84 Made By: Credit Balance

FACILITY SALES RECEIPT



Receipt #
Payment Date:
Household:

1948613
09/27/2020
22433

I/We hereby consent to: my/our and/or my/our child/children's participation in any "Recreational Activity" of the City of Palm Beach Gardens. I/We acknowledge and understand that we may be participating in activities which involve the risk of injury/death, including transportation to and from program activities, and that there are some risks that cannot be foreseen or anticipated at this time. In consideration of the City's consent to my/our participation in the Program and other good and valuable consideration, the receipt of which is hereby acknowledged, I/we hereby release and agree to hold harmless for any foreseen or unforeseen and associated risks, the City of Palm beach Gardens and its officers, agents and employees, volunteers, independent contractors, vendors and/or participants, from any and all losses, claims, damages, liabilities, and causes of action that I/we may have, and which our minor child/children may have, as a result of injury or death, or damage to personal property, which may occur during our and my/our child/children's participation in the program, specifically including but not limited to transportation to and from Program activities. I/We agree and acknowledge that this Release will apply and include claims regardless of the City's own negligence, and is intended to be as broad and inclusive as permitted by the laws of the State of Florida.

I/WE FURTHER ACKNOWLEDGE THE CONTAGIOUS NATURE OF COVID-19 AND THAT THE MERE PRESENCE OF ME, US, AND/OR MY CHILD(REN) AT CITY FACILITIES AND MY/OUR/THEIR PARTICIPATION IN CITY RECREATION ACTIVITY MAY RESULT IN MY, OUR, AND/OR MY CHILDREN'S PERSONAL INJURY, ILLNESS, PERMANENT DISABILITY, AND/OR DEATH. I/We further acknowledge and understand that the City does not provide accident or medical insurance for us or our children in connection with this Program, and I/we agree to accept full responsibility for all medical costs and expenses of ourselves and our children which may arise, and I/we release the City from all claims which I/we may have for the payment of medical expenses or the reimbursement of medical expenses for ourselves and our children.

In the event of an emergency during my/our or my/our child/children's participation in the program, I/we consent to the emergency medical treatment of my child/children at the nearest hospital, medical center or by the emergency medical response services unit at the scene.

I/We understand and agree that the City has the right to dismiss, expel, or suspend us or our children from the Program if the City, in its sole discretion, determines that we or our children's behavior is unruly, violent, or otherwise disruptive of, or detrimental to, the Program. I/we understand that no refunds or fees paid for the program will be given in the event of the expulsion or suspension.

I/We acknowledge and understand that photographs of participants, in the Program may be taken and used by the City on the City's website or in other City publications, and I/we hereby expressly consent to the use of our and our children's name, photograph or other likeness in this regard.

I/We have read and understand this document and I/we voluntarily agree to all the terms and conditions of this Agreement.