



## North Myrtle Beach Park and Sports Complex

North Myrtle Beach Parks and Recreation  
Office: (843) 281-3800 Fax: (843) 280-5593

<http://nmbpark.com>

[recreation@nmb.us](mailto:recreation@nmb.us)

### Renter Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

### Please check the facility(s) you wish to reserve:

#### Picnic Shelters

Picnic Shelter	Location	Capacity	Grill?
___ Salt Marsh	Playground Area	100	Yes
___ Beach Benefits Insurance	Playground Area	50	Yes
___ Low Tide	Playground Area	50	Yes
___ CCNB Lakeside	Lakeside Trail	50	No
___ Grand Slam	Baseball / Softball Complex	50	No
___ Homerun	Baseball / Softball Complex	50	No
___ Hat Trick	Soccer / Lacrosse Complex	50	No
___ Touchdown	Soccer / Lacrosse Complex	50	No

#### Athletic Facilities

(Note the # of fields needed)

\_\_\_ Baseball Field    \_\_\_ Softball Field    \_\_\_ Multipurpose Field    \_\_\_ Batting Cage

#### Park Facilities

\_\_\_ McLeod/Seacoast Meadow    \_\_\_ Sandhills Bank Amphitheater    \_\_\_ Conference Room

See attached sheet for rental fees. **All rental fees must be paid at time of reservation to reserve facility(s).**

### Event Information

Date: \_\_\_\_\_ Start Time (include set-up): \_\_\_\_\_ End Time (include breakdown): \_\_\_\_\_

Describe in detail the type of event (include expected attendance and field preparation details if applicable):  
\_\_\_\_\_  
\_\_\_\_\_

#### Credit Card Information

(Include billing Zip Code if different from address above)

Name on Credit Card: \_\_\_\_\_ Card #: \_\_\_\_\_ Security Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Send Payment with Credit Card Information or Check to: North Myrtle Beach Park and Sports Complex, 1018 Second Ave. S, N.M. B., SC 29582**

#### WAIVER

*In consideration of your accepting my entry, I hereby for myself, my child, my heirs, executors and administrators, waiver and release any and all rights and claims for any damages I or my child may have against the City of North Myrtle Beach Parks and Recreation Department and its representatives, successors and assigns for any and all injuries suffered by myself or my child at any activity or facility under the direction of the City of North Myrtle Beach. I/We agree to be responsible for the facilities per conditions as outlined in this reservation request. I have read the attached rules and regulations sheet and agree to all stated fees and regulations. I understand that a failure to abide by the stated rules will result in forfeiture of security deposit and/or loss of facility reservation privileges. I accept responsibility for all persons attending my event.*

Staff use only

Rental Amount: \_\_\_\_\_ Date Received: \_\_\_\_\_

Payment Type: \_\_\_\_\_ Received By: \_\_\_\_\_ Rec Trac# \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_