



10405 Merrill Road
P.O. Box 157
Hamburg, MI 48139
(810) 231-1000
www.hamburg.mi.us

TO: Hamburg Township Board of Trustees

FROM: Deby Henneman, Township Coordinator

DATE: April 30, 2026

AGENDA ITEM TOPIC: Park Use Application – PYA Football Season 2026

Number of Supporting Documents: **Application & COI**

Requested Action

Approve the Park Use request as outlined in the Parks & Recreation Committee motion from their April 28, 2026 meeting as follows:

Motion by Michniewicz, supported by McCabe, to recommend approval of the Park Use application by PYA dated 3/24/26 as submitted, with the contingency that a Certificate of Insurance naming Hamburg Township as Additional Insured be provided, that the Clerk Department be provided all requested documents to their satisfaction, and that use of the fields will not be allowed during East Park blackout dates, and that as a Partnering Group, in-kind donations for field maintenance may be credited toward fees, and that a Seasonal Flat Rate park use fee be established by the Township Board. VOICE VOTE: Ayes: 3, Absent: (Muck, Miller) MOTION CARRIED

Background

We are in receipt of a Park Use Application from the Pirate Youth Athletics dated March 24, 2026 for use of Football practice areas 1 & 2 located in Manly Bennett Park East for their fall season beginning July 1, 2026 and ending November 1, 2026. Use also includes surrounding green spaces/pavilion for Cheer/Pom, as well as any planned camps or special events. The club has requested use of 2 Football practice areas, leaving field #3 (between Diamonds #1 & #4) available for use by others. They anticipate their number of participants at 100, and 125 people attending at any given time. Their use is on weekdays, leaving all fields available on the weekends, pending a couple of camps which is covered under this application.

Fiscal Considerations

Park fees will need to be established for this group, and their field use will be scheduled with the Parks Department, including camps. Their fees were \$1,000 last year, and any in-kind donations made by way of improvements are credited with proof of purchase. We took over the initial striping of the fields last year, similar to what we do in soccer, however PYA maintains the lines throughout the season with paint we reimburse them for. Last year the initial striping cost was \$1,500 for 2 fields via Legacy Center, and we credited the club's invoice \$151.90 for paint.



Hamburg Township Manly Bennett Park
Park Use Application

P.O. Box 157
10405 Merrill Road
Hamburg, Michigan 48139-0157
(810) 231-1000 Office X-218
(810) 231-4295 Fax

And Release of Liability & Indemnification Agreement

(Application must be submitted 60 days before requested use)

Applicant Information:

Event Sponsor (or name if family or individual use): _____

Name of Event: Football Practice & Camps

Type of Event: Football and Cheer/Pom Park Use Category #: 4 - Event Use

Applicant Name: Pirate Youth Athletics (Jordan Zernick - Registrar Board Member)

Date(s) of Event: July 1st - November 1st *weekdays* Time(s) of Event: 5pm to 9pm *Camp uses dates/times TBD*

Applicant Address: PO Box 741 Hamburg, Mi 48139 Suite or Apt #: _____

Applicant City: Hamburg Township State: Michigan Zip: 48139

Contact Person (present during use): Jim Childs & Jordan Zernick

Contact's Affiliation with Applicant: Pirate Youth Athletics - Board Member - Registrar

Event Co-applicant, if any: _____

All Co-applicants must also sign all applications and waivers.

Co-applicant relationship to Applicant: _____

Co-applicant's phone: _____

Insurance Information:

Insurance Carrier: K&K Insurance Group, Inc.

Certificate of Insurance must be provided by all applicants as outlined in Appendix B in the Park Facility Use Policy.

Policy #: *9* _____ Expiration Date: 9/26/2026

Limit of General Liability: 1,000,000 Occurrence 5,000,000 Aggregate

Umbrella Coverage Limit (if any): _____ Occurrence _____ Aggregate

Event Description: *(any information that doesn't pertain to your event please indicate not applicable)*

Please describe the event you propose to host: Football/Cheer - Pom Camps and practice

Total Number of participants/spectators/guests anticipated during event: 125

Average of participants/spectators/guests anticipated at any given time: 100

Site of Proposed Event; include all areas of the parklands that will be used: Football Fields 1 & 2

Cheer/Pom will make use of open fields and/or Pavillion

Include site plan drawing reflecting all areas of the Township Park and recreational facilities the event will effect

Will there be camping and trailer facilities? If so, are overnight stays anticipated: No

Number of Volunteers: 30 Are Volunteers trained?: Yes
Please attach copy of Volunteer Handbook if applicable

Will tents be used?: No If so, please indicate locations: _____

Under no circumstances are tent stakes to be driven into asphalt surfaces. Tent locations must be pre-approved.

Will admission be charged? If so, how much: No

Parking fee charged? If so, how much: No Valet service available? No

Will Food/Beverages be served? If so, types of food and name of persons serving: No

For anything other than pre-packaged foods, Concession Application, Health Department License and Products Liability coverage is required.

Will there be Fireworks or any other pyrotechnic display? If so, describe: No

Insurance requirements to be established during the event review process as stated in Appendix B of the Park Facility Use Policy.

Will there be any animals present? If so, describe: No

Pets are not allowed in Parkland during events. Service Dogs are allowed with proper certification.

Will there be Amusement rides or games? If so, describe: No

Insurance requirements to be established during the event review process as stated in Appendix B of the Park Facility Use Policy.

Will there be a need for vehicles to be used on Township grounds? If so, describe: No

Personal vehicles require proof of Auto Liability based on the description of use and areas needing to be accessed during event.

Will there be a need for Emergency Responders over and above what is included in the Public Safety Fee? If so, describe: No

Hamburg Township reserves the right to require private security and/or emergency responders be present during any event.

Specific services required from the Township, if any: Storage Shed Access

Other information regarding your event that you feel may be helpful: _____

Organized Sports and/or Sporting Events:

Please indicate type of sports event: Regular Season (Games/Practices) Sports Tournament Other

If Tournament or other event, complete Event Description on Page 2 and provide additional details, if any:

Release of Liability & Indemnification Agreement

The approval of this park use request is contingent upon receipt of all requested information, review process of the Hamburg Township Parks & Recreation Committee, and approval of the Hamburg Township Board. The applicant may be required to provide additional information as is deemed necessary by the Parks & Recreation Committee and/or Township Board, and may be required to meet with the Parks Administrator and/or Parks Coordinator to supply additional information or to answer questions. If the Park Use Application is received less than 60 days prior to the requested event date, the Parks & recreation Committee and Township Board may process the application, however, the application fee may be increased in an amount to be determined by the Parks & Recreation Committee and/or the Township Board.

The undersigned acknowledges that he/she/they are authorized to sign this application on behalf of the applicant and that he/she/they have received a copy of all documents relating to the use of the park and recreational facilities including the Hamburg Township Park Facility Use Policy Rules and Regulations.

In further consideration of entering into this agreement, to the fullest extent permitted by law, the Applicant agrees to defend, pay on behalf of, indemnify, and hold harmless Hamburg Township, its elected and appointed officials, employees and volunteers, and others working on behalf of Hamburg Township against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed, or recovered against or from Hamburg Township, by reason of personal injury, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of, or is in any way connected or associated with this contract.

The Applicant covenants and agrees that it will have a representative on the premises at all times to monitor the set-up, use and tear-down of the use and all activities related to thereto and under no circumstances shall the use of the park be granted or sublet to any other group or organization without the express written permission of the Hamburg Township Board of Trustees.

Any Applicant or group or entity co-hosting an event must provide a Certificate of Insurance naming Hamburg Township as an additional insured and proof of that coverage must be provided prior to the issuance of the permit for the event. The Applicant and/or co-host of any event must comply with all rules, regulations and policies of the Township pertaining to the said use and will be ultimately responsible for any and all damages to any Hamburg Township property resulting from the use, and shall otherwise restore the Township property to its previous condition.

Personal Property Damage Claims: The applicant hereby releases Hamburg Township, Its elected and appointed officials, employees and volunteers, and others working behalf of Hamburg Township, from any and all liability or responsibility to the applicant or anyone claiming through or under the applicant by way of subrogation or otherwise, for any loss or damage to applicant's property resulting from any incident, except damages resulting from the gross negligence of the Township, as it relates to the activities and uses contemplated by the application. It is understood by the applicant that all private property kept, stored or maintained in and on the Hamburg Township Park and recreational facilities shall be so kept, stored or maintained at the risk of the Applicant.


Initials: JZ

Public Health & Safety: The applicant hereby swears and attests that they have complied with all aspects and intent, of Background Checks and that they are in compliance³ with the Michigan Sports Concession Law, Acts 342 & 343, Public Acts of 2012, as referenced in the Park Facility Use Policy and outlined in Appendix A. The applicant understands that falsification of the above statement and/or failure to comply with these requirements may result in the suspension and/or revocation of the use of the Hamburg Township parkland facilities.

Initials: JZ

Applicant's Signature: Jordan C. Zernick Date: 03/24/2026

Co- applicant's Signature:  Date: _____

Parks Coordinator:  Date: 4/22/26

For office use only

Comments: _____

Meeting Approval Dates: 4/28/26 Parks & Recreation _____ Public Safety _____ Township Board

Application has been (Circle one) Approved Denied

Hamburg Township Representative: _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/02/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER K&K Insurance Group, Inc. 1712 Magnavox Way Fort Wayne IN 46804		CONTACT NAME: Mass Merchandising Underwriting	
		PHONE (A/C No, Ext): 1-800-426-2889	FAX (A/C, No): 1-260-459-5105
		E-MAIL ADDRESS: [REDACTED]	
		PRODUCER CUSTOMER ID:	
		INSURER(S) AFFORDING COVERAGE	
		NAIC #	
INSURED Pirate Youth Athletics PO Box 741 Hamburg, MI 48139 A Member of the Sports, Leisure & Entertainment RPG		INSURER A: AIG Specialty Insurance Company	26883
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: W03126950

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	X		[REDACTED]	09/26/2025 12:01 AM EDT	09/26/2026 12:01 AM	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea Occurrence) \$1,000,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$5,000,000 PRODUCTS - COM/OP AGG \$1,000,000 PROFESSIONAL LIABILITY \$1,000,000 LEGAL LIAB TO PARTICIPANTS \$1,000,000
A	<input type="checkbox"/> AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY NOT PROVIDED WHILE IN HAWAII			[REDACTED]	09/26/2025 12:01 AM EDT	09/26/2026 12:01 AM	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB OCCUR <input type="checkbox"/> EXCESS LIAB CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
A	<input type="checkbox"/> MEDICAL PAYMENTS FOR PARTICIPANTS			[REDACTED]	09/26/2025 12:01 AM EDT	09/26/2026 12:01 AM	PRIMARY MEDICAL EXCESS MEDICAL \$25,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Sexual Misconduct Liability - \$250,000 each "Insured Event" limit with \$1,000,000 aggregate

Sport(s): Cheerleading - Youth Age(s): 12 and under; Youth Football (Tackle & Contact) Age(s): 12 and under

The certificate holder is added as an additional insured, but only for liability caused, in whole or in part, by the acts or omissions of the named insured.

See Attached Additional Remarks Schedule

CERTIFICATE HOLDERHamburg Township
PO Box 157
Hamburg, MI 48139
(Owner/Lessor of Premises)**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Coverage is only extended to U.S. events and activities.

** NOTICE TO TEXAS INSURED: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas

AGENCY CUSTOMER ID:
LOC #

ACORDTM

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY K&K Insurance Group, Inc. 1712 Magnavox Way Fort Wayne IN 46804		NAMED INSURED Pirate Youth Athletics	
POLICY NUMBER 9YAPG0001334486101			
CARRIER AIG Specialty Insurance Company	NAIC CODE 26883	EFFECTIVE DATE: 09/26/2025	
ADDITIONAL REMARKS			
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.			
FORM NUMBER: 25 FORM TITLE Certificate of Liability Insurance			

For Sport(s): Cheerleading - Youth, Youth Football (Tackle & Contact)

Limited Coverage for "Neurodegenerative Injury" endorsement applies. Neurodegenerative Injury Limit: \$1,000,000 occurrence/\$1,000,000 aggregate; Neurodegenerative Injury Supplementary Payments: \$1,000,000 occurrence/\$1,000,000 aggregate. "Neurodegenerative injury" means any brain injury, neurological injury, disease, condition or dysfunction, including, but not limited to, Alzheimer's disease, Parkinson's disease, amyotrophic lateral sclerosis (ALS), mild traumatic brain injury, repetitive brain trauma, chronic traumatic encephalopathy (CTE), dementia, cognitive injury or disorder, memory loss, anxiety disorder, mood disorder, depression, sleeplessness, impulse control problems, headaches or single or repetitive concussive or sub-concussive injury or trauma.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – DESIGNATED
PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
Hamburg Township PO Box 157 Hamburg, MI 48139
Named Insured: Pirate Youth Athletics
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.