

CA# _____ (insurance verification)

PERMIT# _____

City of Los Angeles • Department of Recreation and Parks • Valley Region
APPLICATION FOR USE OF FACILITIES (THIS IS NOT A PERMIT)

APPLICATIONS NOT SUBMITTED TWO WEEKS PRIOR TO EVENT, ARE SUBJECT TO A \$50.00 LATE PROCESSING FEE

PLEASE PRINT AND COMPLETE ITEMS 1 THRU 13 AND SIGN THE DOCUMENT (SIGNATURE OF APPLICANT)

1. Recreation Center _____

2. Name Of Organization _____ Representative's Name _____

4. Mailing Address _____ City _____ Zip _____

5. Contact Evening # _____ Cell # _____ e-mail _____

6. Type of Event _____

7. Date and Time of Event

<u>Day(s)</u>	<u>Month/Date(s)</u>	<u>Time(s)</u>
Sunday	_____	_____ to _____
Monday	_____	_____ to _____
Tuesday	_____	_____ to _____
Wednesday	_____	_____ to _____
Thursday	_____	_____ to _____
Friday	_____	_____ to _____
Saturday	_____	_____ to _____

8. Refreshments? Yes No No. Participants: Adult: _____ Youth: _____

9. Facilities/Services Requested (check all that apply):

- Auditorium Kitchen Outdoor Area Other _____
 Gymnasium Meeting Room Picnic Area Utility Hook-up Field # _____

10. Is this a Fundraiser? Yes No Will catered food be served? Yes No Canopies/Tents? Yes No

11. Moon Bounce Yes No Company Name _____

Contact Name _____ Phone No. _____

12. Will you require electrical set-ups? Yes No Will you be erecting/assembling any structures? Yes No

13. If you said "yes" to one or more of the above questions, your event may need insurance, check with the Facility Director.

HOLD HARMLESS/WAIVER OF DAMAGES

Permittee hereby expressly agrees on its behalf and that of its dependents, heirs, assigns and legal representatives: That the City of Los Angeles, its officers, agencies, employees and volunteers shall not be responsible or liable for any injury (physical or mental), death, damage, loss or expense (including legal costs and reasonable attorney fees) either to Permittee, its invitees, or either party's property incurred while Permittee is exercising the above permission or is engaged in activities related thereto.

PERMITTEE HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY AND ALL RISK OF INJURY, DEATH OR PROPERTY DAMAGE

arising out of said activities. Permittee further agrees to indemnify and hold harmless the City, its officers, agencies, employees, and volunteers from all loss or liability, actual or alleged, that may arise from Permittee's conduct, either intentional or negligent, while participating in the above described activities. However, neither the waiver nor the indemnity agreement exempts the City or its officers, agencies, employees or volunteers from acts of gross negligence or willful misconduct.

Permittee hereby represents that:

Permittee is aware of the condition of the public premises and accepts the premises in their present condition. Permittee agrees to abide by all safety regulations. Permittee has carefully reviewed this document, understands its contents, and signs it voluntarily, without being subject to coercion.

THE SALE, SERVING AND CONSUMPTION OF ALCOHOLIC BEVERAGES IS NOT PERMITTED. SOUND AMPLIFYING SYSTEMS ARE PROHIBITED. (MC63.44)

I certify that all statements on this application are complete and correct.

Signature of Applicant/Permittee _____ Date _____

TO BE COMPLETED BY DIRECTOR IN CHARGE

APPLICATION MUST BE FILLED OUT COMPLETELY, GIVEN IMMEDIATELY TO THE DISTRICT SUPERVISOR FOR APPROVAL WITH ALL FEES PAID IN FULL OR RESERVATIONS REQUIRE AN ADVANCE DEPOSIT OF 50% OF THE TOTAL FEES (PER RATES AND FEES MANUAL). ALL APPLICATIONS ARE TO BE SUBMITTED TO THE REGION OFFICE AT LEAST TWO WEEKS PRIOR TO EVENT.

Facility is Normally : Open Closed Staff Coverage Required: Yes No Hrs Staffed: _____ AM PM to _____ AM PM

Is Insurance Required : Yes No Multiple days used, activity involves risk, or large event/number of people CAO# / Insurance verification
Top of front page

Fees: Non-Fee Permit Fee Generating Permit Proof of Non-Profit status attached Yes No

Basic Room Fee (1st 3 hours) = \$ _____

<input type="checkbox"/>	# of Staff		x	# of Hours requested	=	Total Staff Hrs	x	Hourly Rate	\$		=	\$
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<input type="checkbox"/> No. of Additional Hours Needed (Rates & Fees)		x	Hourly Rate	\$		=	\$
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<input type="checkbox"/> Additional Rooms (Rates & Fees)		x	\$		=	\$
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Use of Kitchen (Rates & Fees) = \$ _____

Refreshment Fee (Rates & Fees) = \$ _____

<input type="checkbox"/> Field & Gymnasium Rental Fee (Rates & Fees)		# of Hours	x	\$		=	\$
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<input type="checkbox"/> Picnic Reservation Fee:	<input type="checkbox"/> 1-50	<input type="checkbox"/> 51-100	<input type="checkbox"/> 101-200	<input type="checkbox"/> 201-400 <small>**see note</small>	<input type="checkbox"/> 400+ <small>**see note</small>		=	\$
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Non-Refundable Permit Fee (All reservations) - deposited into (MRP 500) = _____

Picnic Maintenance Fee (MRP 501) = _____

Moon Bounce Fee (Special Fund) = _____

<input type="checkbox"/> Rental:	<input type="checkbox"/> Chairs		#	x	\$		x	\$		=	\$
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Utility Hookup Fee = \$ _____

<input type="checkbox"/> Clean-up Breakage Refundable Deposit	Receipt No. _____	=	\$
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Other Charges (Please List) = \$ _____

TOTAL CHARGES: = \$ _____

LESS DEPOSIT: Receipt No. _____ Date _____ = \$ _____

Date Balance Due By: _____ TOTAL: = \$ _____

Approval of Director In Charge _____ Date _____

Approval of District Supervisor _____ Date _____

Approval of Principal Recreation Supervisor _____ Date _____

Approval of Principal Maintenance Supervisor _____ Date _____

**** Supervisor Please Note: For LARGE SPECIAL EVENTS (200 persons or more) contact Principal Supervisor and Superintendent.**

** Approval of Regional Superintendent (200 persons or more) _____ Date _____

Comments: _____
