

CA# \_\_\_\_\_ (Insurance verification)  
Expiration Date \_\_\_\_\_

Google Doc # \_\_\_\_\_  
Permit # \_\_\_\_\_  
Payment update: Yes \_\_\_ No \_\_\_



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



PERMITTEE MAY NOT PUBLICIZE THE EVENT UNTIL A PERMIT HAS BEEN ISSUED

PLEASE READ AND COMPLETE ITEMS 1 THRU 19 AND SIGN THE DOCUMENT (SIGNATURE OF APPLICANT)

1. Recreation Center Toberman Park  
2. Name of Organization Alliance Burton Tech High 3. Representative's Name Javier Rubio  
4. Mailing Address 10101 S. Broadway Blvd city Los Angeles Zip 90003  
5. Contact Evening (323) 920-6125 Cell (323) 920-6125 e-mail jrubio@laalliance.org  
6. Type of Event \_\_\_\_\_

7. Date and Time of Event

Day(s)	Month/Date(s)	Time(s)	
Sunday	_____	_____	to _____
Monday	_____	_____	to _____
Tuesday	_____	_____	to _____
Wednesday	<u>9/18, 10/02</u>	<u>4p.m.</u>	to <u>6p.m.</u>
Thursday	_____	_____	to _____
Friday	<u>9/27</u>	<u>4p.m.</u>	to <u>6 p.m.</u>
Saturday	_____	_____	to _____

8. Charging Fee(s)?  Yes  No \$ \_\_\_\_\_ 9. Will food sales be conducted?  Yes  No 10. # Participants: Adult \_\_\_\_\_ Youth \_\_\_\_\_

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

Auditorium  Kitchen  Outdoor Area  Baseball Diamond # \_\_\_\_\_  
 Gymnasium  Meeting Room  Utility Hookup  Picnic Area # \_\_\_\_\_  
 Other Volleyball Court  
 Field # \_\_\_\_\_

12. Is this a Fundraiser?  Yes  No 13. Refreshments Served?  Yes  No 14. Canopies/Tents?  Yes  No  
15. Center Rental  Company Rental  Company Name: \_\_\_\_\_ Chairs:# \_\_\_\_\_ Tables:# \_\_\_\_\_ Insurance #: \_\_\_\_\_  
16. Moon Bounce  Yes  No Company Name \_\_\_\_\_  
Moon bounce CA # (Insurance verification) \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Phone No. \_\_\_\_\_

17. Will you require electrical set-ups?  Yes  No 18. Will you be erecting/assembling any structure larger than a 10 x 10 canopy?  Yes  No  
19. There is a possibility that this event may need insurance, please 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 HERBY 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 APPLIFYING SYSTEMS ARE PROHIBITED. (MC63.44)**

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

Signature of Applicant/Permittee: \_\_\_\_\_ Date 8-13-24

## 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 TWO WEEKS PRIOR TO EVENT. SPECIAL EVENTS WITH 200+ REQUIRES PRIOR APPROVAL BEFORE FEES ARE COLLECTED AND 12 WEEKS PRIOR TO THE EVENT

Facility is normally :  Open  Closed Staff Coverage Required:  Yes  No

Is Insurance Required :  Yes  No \*Leagues, competitive sports, activity involves risk, or large event/number of people. CAO # / Insurance verification Top of front page

Fees:  Regular Permit  Fee Generating Permit Group Exempt from fees?  Yes  No If yes - Exemption number \_\_\_\_\_ Proof of Non-Profit status attached  Yes  No

No. Staff Needed x # of hours requested = Total Staff Hrs x Hourly rate \$ = \$

Basic Room Fee (hourly rate) # of hours requested x Hourly rate \$ = \$

Additional Rooms Time(s): # of hours requested x Hourly rate \$ = \$

Use of Kitchen (Rates & Fees) = \$

Indoor Refreshment Fee (Rates & Fees) = \$

Field Rental Fee: Daylight Use Hours x Hourly rate \$ = \$

Field Lights used Hours x Hourly rate \$ = \$

Gymnasium Rental Fee: Hours x Hourly rate \$ = \$

Scoreboard use = \$

Picnic Reservation Fee:  1-50  51-100  101-200  201-400\*\*see note  201-400\*\*see note = \$

Non-Refundable Picnic Permit Fee (All picnic reservation and specific facilities) – (deposited into Regional Account) = \$

Moon Bounce Fee (100% Center MRP) = \$

Center Rental:  Chairs # = \$  Tables # = \$ = \$

Utility Hookup Fee = \$

Other Charges (Explain) = \$

Clean-up Breakage 100%  or 80%  Refundable Deposit: Receipt No. \_\_\_\_\_ Date: \_\_\_\_\_ = \$

TOTAL CHARGES with Deposit: = \$

LESS PAYMENT: Receipt No. \_\_\_\_\_ Date: \_\_\_\_\_ = \$

Balance Due By (date): \_\_\_\_\_ TOTAL BALANCE DUE: = \$

Less additional payments(dates) \_\_\_\_\_

Receipt # / Amount: R# \_\_\_\_\_ \$ \_\_\_\_\_ R# \_\_\_\_\_ \$ \_\_\_\_\_ R# \_\_\_\_\_ \$ \_\_\_\_\_ Total: = \$

Total After Additional Payments = \$

Approval of Director in Charge \_\_\_\_\_ Date \_\_\_\_\_

Approval of District Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Approval of Principal Recreation Supervisor \_\_\_\_\_ Date \_\_\_\_\_

\*\*PLEASE NOTE: For EVENTS (200 persons or more) Principal Maintenance Supervisor and Recreation Superintendent Required  
\*\*Special Event long Form may be Required

Approval of Principal Maintenance Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Approval of Superintendent \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_