



## TOWN OF DISCOVERY BAY COMMUNITY SERVICES DISTRICT

# PARK RESERVATION & USE PERMIT APPLICATION

### LOCATION

#### CORNELL PARK

Shaded Picnic Area    Baseball Field    Soccer Field    Bocce Ball Court    Horseshoe Pits    Pickle Ball Court

#### RAVENSWOOD PARK

Covered Picnic Area #1    Covered Picnic Area #2    Soccer Field

### EVENT INFORMATION

Date Submitted: \_\_\_\_\_ Event Date: \_\_\_\_\_

Set up Times: \_\_\_\_\_ to \_\_\_\_\_ Actual Event Times: \_\_\_\_\_ to \_\_\_\_\_ Take down/Clean-up: \_\_\_\_\_ to \_\_\_\_\_

Estimated Attendance: \_\_\_\_\_

- Use of TODB Equipment (501c3 Only. Upon Approval. Fees May Apply.)
- Jump House – If yes, name of company \_\_\_\_\_ Phone number \_\_\_\_\_
- No Alcohol \_\_\_\_\_  No Food Trucks/Carts \_\_\_\_\_

Initials

Initials

If alcohol is on site, this may be reason to forfeit deposit \_\_\_\_\_

Signature

### CONTACT INFORMATION

Name/ Organization: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Main Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

The rental fee and deposit are due the day you make your reservation. The rental fee may be paid by check, money order, cash, Visa or Mastercard. The damage deposit is required to be paid separately from the rental fee by check or money order made payable to the "Town of Discovery Bay CSD." Park Rental cancellations occurring five (5) business days or more prior to the event will be refunded all fees and deposit(s). Cancellations occurring four (4) business days or less prior to the event will forfeit all applicable fees but be refunded all of the deposit.

**\*\*NO ALCOHOL IS ALLOWED AT ANY PARK\*\***

**For Accounting Use Only**

Rental Rate: \_\_\_\_\_ Deposit Amount: \_\_\_\_\_ Deposit Ck # \_\_\_\_\_

Number of Hours: \_\_\_\_\_ Date Rental Fee Paid: \_\_\_\_\_  Ck # \_\_\_\_\_  Cash  Credit Card

Total: \_\_\_\_\_

**Staff Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Fee Waiver Approved by Town General Manager: \_\_\_\_\_ **Date:** \_\_\_\_\_

**WAIVER, RELEASE & INDEMNITY AGREEMENT**

Waiver, Release and Indemnity Agreement: The person signing this Agreement warrants that he/she has the authority to execute this Agreement or on behalf of the Organization/Group and that he/she or the Organization/Group will be bound to the terms of the Agreement by such signature. I hereby understand this application is to request usage of a Park area and accept personal responsibility for damage sustained and/or cost incurred by the Town of Discovery Bay CSD because of the occupancy of said premises by myself or my Organization/Group. I, or my Organization/Group, agree to fully reimburse the Town of Discovery Bay CSD for any damage arising from the use of said Park, and costs and/or attorneys' fees, if any, incurred in collection. I have received, read and fully understand the rules, regulations and policies for use of the Park area. I agree to abide by, inform my Organization/Group, and enforce the rules, regulations and policies of the Town of Discovery Bay CSD governing the use of the Park area. I understand and agree that failure to abide by the rules, regulations and policies of the Town of Discovery Bay CSD shall result in the immediate loss of privileges of use of the Park area and/or privileges for future use. I also agree to hold the Town of Discovery Bay CSD, its officers, employees, the individual members thereof, agents, and volunteers, harmless from any damage, liability, cost or legal expense that may arise during or be caused in any way by such use or occupancy of the Park area. I agree that this Waiver, Release and Indemnity Agreement is binding on my heirs and assigns. **By signing below the applicant agrees to comply with all local, state, and federal laws.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR PARKS/LANDSCAPE STAFF ONLY**

Note any Pre-existing damage to the area: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Note any damage or cleaning needed to the premises: \_\_\_\_\_  
\_\_\_\_\_

Deposit Amount: \_\_\_\_\_

Cost on Damages: \_\_\_\_\_

Cost on Cleaning: \_\_\_\_\_

Deposit Returned: \_\_\_\_\_

Staff Signature: \_\_\_\_\_ **Date:** \_\_\_\_\_

Renter Signature: \_\_\_\_\_ **Date:** \_\_\_\_\_