



## COMMUNITY PARK USE APPLICATION/PERMIT

6000 Heritage Trail, Clayton, CA 94517

(925) 673-7300 | [www.claytonca.gov](http://www.claytonca.gov)

Applicant/Contact Name: \_\_\_\_\_

Organization's Name: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_

Description of Activity: \_\_\_\_\_

Anticipated Attendance: \_\_\_\_\_

1. Will alcohol be served or sold at this function? No \_\_\_\_\_ Yes \_\_\_\_\_

*(If answering yes to question 1, Applicant must also obtain a City Alcohol Permit.)*

2. Is this a public or community event? No \_\_\_\_\_ Yes \_\_\_\_\_

3. Will food or beverage be served (given away or sold)? No \_\_\_\_\_ Yes \_\_\_\_\_

*(If answering yes to questions 2 and 3, Applicant must obtain a temporary food facility permit from Contra Costa County Environmental Health Department. Proof of the permit must be supplied to the City of Clayton before final approval of this City Park rental application. See [www.cchealth.org/EH](http://www.cchealth.org/EH).)*

4. Specify which amenity or amenities you would like to reserve:

### Group Picnic Areas:

\_\_\_ #1    \_\_\_ #2    \_\_\_ #3    \_\_\_ #4    \_\_\_ #5 Clusters (number of tables \_\_\_)

\_\_\_ #6 (Large Group Picnic Shelter)    \_\_\_ #5 & #6 Combo    \_\_\_ #7

Date Requested: \_\_\_\_\_

Hours of Use:    From \_\_\_\_\_    To \_\_\_\_\_

### Ball Fields:

\_\_\_ Field #1    \_\_\_ Field #2    \_\_\_ Field #3    \_\_\_ Field #4

Date Requested: \_\_\_\_\_

Hours of Use:    From \_\_\_\_\_    To \_\_\_\_\_

The undersigned hereby agrees to be responsible for the repair of any damage to the facility occurring during and by this use, and agrees to be responsible for the conduct of all persons attending this function. Applicant further agrees to execute the required City of Clayton Hold Harmless Agreement, and to submit to the City any required certificates of insurance. The undersigned has received a copy of the Park Use Policies and agrees to comply with the rules and regulations therein.

\_\_\_\_\_  
Applicant/Designated Representative Signature

\_\_\_\_\_  
Date

### Hold Harmless Agreement

As applicant, or an officially authorized representative of the applicant, agree that as a condition of use of the City of Clayton Park Facilities, the applicant hereby agrees to, and shall defend, indemnify and hold the City of Clayton, its officials, officers, directors, employees, volunteers and agents harmless from and against any or all loss, liability, expense, claim, costs, suits and damages of every kind, nature and description, directly or indirectly, arising from usage or activities for which Community Park Use Permits are granted.

\_\_\_\_\_  
Applicant/Designated Representative Signature

\_\_\_\_\_  
Date

**Note: All fees are due at time of application. Make checks payable to City of Clayton. Limitations and penalties may apply for rescheduled or late cancellations of reservations. Reservations scheduled on dates when rain is forecasted can be rescheduled (fees not refunded) within 12 months of original rental date. See Fee Schedule for more information.**

#### City of Clayton Use Below this Line

Category:       Resident               Non-Resident               Commercial               Community

Picnic Area #	# of hours	@	\$ _____	per hour =	\$ _____	101-5602-00
Picnic Area #	# of hours	@	\$ _____	per hour =	\$ _____	101-5602-00
Ball Field #	# of hours	@	\$ _____	per hour =	\$ _____	101-5602-00
Ball Field #	# of hours	@	\$ _____	per hour =	\$ _____	101-5602-00
Alcohol Permit					\$ _____	101-5302-00 #AP
Noise Permit					\$ _____	101-5301-00 #NP
<b>Subtotal - Permit and Rental Fees:</b>					\$ _____	
<b>Reservation Deposit - Cleaning/Damage/Alcohol:</b>					\$ _____	601-2014-00 CCP Event date:
<b>TOTAL DUE:</b>					\$ _____	

Amount Paid: \_\_\_\_\_ Receipt No.: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Application Checklist:

- \_\_\_ Hold harmless agreement signed
- \_\_\_ Signed Park rental policy received
- \_\_\_ Proof of insurance received/attached (only if serving alcohol)
- \_\_\_ Verify identification (i.e. driver's license, government issued ID, passport)

Adjustment of rental fees approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Application/Permit accepted by: \_\_\_\_\_ Date: \_\_\_\_\_