

Arcade Creek

Recreation and Park District

Park Use Application - Picnic Area & Group Picnic Areas

Mailing Address: PO Box 418114, Sacramento, CA 95841-8114

Physical Address: 4855 Hamilton St. Sacramento, CA 95841

Phone 916-482-8377 FAX 916-483-1320

Please complete the following and return to the Arcade Recreation and Park District. Completion of this form does not guarantee that your request will be granted. If the facility is available, the complete deposit must be submitted to reserve the date.

PLEASE NOTE: No alcohol OF ANY KIND is allowed in the park. You are responsible for any substances that your guests bring to the park site.

Organization Name if applicable:

Responsible Person		Alternate Responsible Person	
Address	Day Phone	Address	Day Phone
City, Zip	Evening Phone	City, Zip	Evening Phone
Cell Phone		Cell Phone	
Email		Email	

Responsible Person or Alternate MUST be on site at opening and closing times]

GENERAL INFORMATION

1. Facility Requested:	8. Will the event be catered?
2. Date(s) Requested:	9. Will you have live music or DJ?
3. Purpose of Activity:	10. Is the event open to the public?
4. Event Hours (include set up and clean up): Time: _____ to _____	11. Will Admission fees be charged?
	12. Will contributions be solicited?
5. Time Guests Arrive:	15. Will items be offered for sale?
6. Estimated Attendance:	16. Will food be sold?
7. Specific Equipment to be brought on site:	
	For questions 11-15, describe purpose for proceeds

Facility Deposit [Subject to review]	Non Profit - Must show identification	Private Party
Group Picnic Area	\$120.00	\$120.00
Facility Rental Fee		
Group Picnic Area (GPA)	\$50.00 / 8 hour day	\$100.00/ 8 hour day
Individual Picnic Area	\$5.00 per hour	\$10.00 per hour
Wedding Area	N/A	\$10.00 per hour

Please complete the second page of this application

INDEMNITY AND HOLD HARMLESS CLAUSE

INDEMNIFICATION

The **(USER/RENTER)** shall indemnify, defend, and hold harmless **Arcade Creek Recreation & Park District**, its officers, employees, and agents from any and all losses, costs, expenses, claims, liabilities, actions, or damages, including liability for injuries to any person or persons or damage to property arising at any time out of or in any way related to the **(USER/RENTER)**'s use or occupancy of a facility or property controlled by the **Arcade Creek Recreation & Park District**, unless solely caused by the gross negligence or willful misconduct of **Arcade Creek Recreation & Park District**, its officers, employees, or agents.

(User/Renter) will further pay any and all costs and expenses, including but not limited to court costs and reasonable attorney's fees, incurred by **(User/Renter)** on account of any such claims, demands or liabilities.

I have read and fully understand the Arcade Creek Recreation and Park District Facility Use Regulations and agree that my event will follow these regulations and guidelines. I further understand that failure to follow these regulations and guidelines can result in loss of my deposit and shut down of my event. In the event of a complete shut down, I will be responsible for any costs associated and my fees and deposit are forfeited.

Initial _____

Responsible Person _____	Date _____
Signature _____	
Address _____	
City _____	Zip _____
Day Phone _____	Cell Phone _____
Email _____	

For office use only

Deposit Paid	Date			Non-profit	Y N	Insurance	Y N
Rental Fees Paid	Date			Standing Agreement	Y N	Security	Y N
Deposit Processed for Return to Renter	Date			Deposit Amt Kept			

Notes:

Approved By		Permit #
Date of Approval		