

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

PERMIT # \_\_\_\_\_

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

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

Auditorium  Kitchen  Outdoor Area  Baseball Diamond # \_\_\_\_\_  Other \_\_\_\_\_

Gymnasium  Meeting Room  Utility Hookup  Picnic Area # \_\_\_\_\_  Field # \_\_\_\_\_

10. Is this a Fundraiser?  Yes  No Refreshments?  Yes  No Canopies/Tents?  Yes  No

11. Rental:  Yes  No  Chairs # \_\_\_\_\_  Tables # \_\_\_\_\_

12. Moon Bounce  Yes  No Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone No. \_\_\_\_\_

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

14. 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 \_\_\_\_\_

## 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.

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

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:  Regular Permit     Fee Generating Permit      Group Exempt?  Yes  No  
If yes put group number \_\_\_\_\_      Proof of Non Profit status attached  Yes  No

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

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

Additional Rooms (Rates & Fees)      x      \$      x      \$      = \$ \_\_\_\_\_

Use of Kitchen (Rates & Fees) = \$ \_\_\_\_\_

Refreshment Fee (Rates & Fees) = \$ \_\_\_\_\_

Field / Gymnasium Rental Fee      Hours    x    \$      = \$ \_\_\_\_\_

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

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

Picnic Maintenance Fee (MRP # \_\_\_\_\_) = \$ \_\_\_\_\_

Moon Bounce Fee (Special Fund) = \$ \_\_\_\_\_

Rental:     Chairs    # \_\_\_\_\_ x \$ \_\_\_\_\_     Tables    # \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Utility Hookup Fee = \$ \_\_\_\_\_

Clean-up Breakage Refundable Deposit      Receipt No. \_\_\_\_\_ = \$ \_\_\_\_\_

Other Charges (Explain) \_\_\_\_\_ = \$ \_\_\_\_\_

**TOTAL CHARGES:** = \$ \_\_\_\_\_

LESS DEPOSIT:      Receipt No. \_\_\_\_\_      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) notify Principal Supervisor and Superintendent.

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

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