Park Picnic Rental Application

LOCATION REQUESTED ______________________________________________________

DATE(S) REQUESTED ______________________________________________________

TIME(S) REQUESTED ______________________________________________________

GROUP/ORGANIZATION _____________________________________________________

PERSON RESPONSIBLE _____________________________ E-MAIL ___________________

ADDRESS __________________________________________________________________

CITY ____________________________ STATE ______ ZIP __________________

HOME PHONE ____________________ CELL PHONE ____________________________

ANTICIPATED ATTENDANCE: ___________

EVENT DETAILS:

________________________________________________________________________

________________________________________________________________________

Fees for Use of the Park Picnic Area

<table>
<thead>
<tr>
<th>Resident Fee</th>
<th>Non-Resident Fee</th>
<th>Resident Fee *Special Event Permit</th>
<th>Non-Resident Fee *Special Event Permit</th>
<th>Commercial Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth:</td>
<td>Youth:</td>
<td>$104.00 per hour</td>
<td>$208.00 per hour</td>
<td>$414 per hour</td>
</tr>
<tr>
<td>$20.75 per hour</td>
<td>$41.25 per hour</td>
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<tr>
<td>Adult</td>
<td>Adult</td>
<td>Special Event Fee: $159.00 + Insurance</td>
<td>Special Event Fee: $159.00 + Insurance</td>
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</tr>
<tr>
<td>$30.75 per hour</td>
<td>$41.25 per hour</td>
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</tbody>
</table>

* C.7.50 SBMC

Special Event: a short term land use activity that is distinct from the customary land use of the property on which it is conducted and that involves the potential for a substantial number of participants or spectators. Special Event includes carnival, live music concert, outdoor dining, seasonal goods market (such as a Christmas Tree Farm or pumpkin farm), street fair and street marathon.
Rules/Restrictions:

1. Live music permitted with approval of Special Event Permit.
2. No smoking is permitted in the park area at any time.
3. No alcohol permitted in public parks, public property, or parking lots.
4. All measures shall be taken to consider the impacts upon neighboring residents, including, but not limited to: noise control, supervision of guests, termination of music and event no later than approved time.
5. No driving of stakes of any size into the grass area of City Parks without authorization and supervision of a qualified City Employee.
6. Event is not to block public access.
7. There shall be no disposal of liquids or chemicals of any kind on grass.
8. No open fires or BBQs at the Park.
10. Any events or rentals with a bounce house must be approved with a Park Rental application, provided General Liability Insurance Policy, naming the City of Seal Beach additionally insured.
11. Applicant to be responsible for clean up during and after the event including placement of additional portable trash cans, if necessary.
12. All vendors must possess a valid City of Seal Beach Business License to operate.
13. All food vendors must obtain any required permits from OC Environmental Health.
14. No glass containers permitted within City Parks.

I ______________________________________ individually and/or on behalf of the named organization, agrees to defend, indemnify and hold harmless the City of Seal Beach and its officers, employees, and agents harmless and free from any liability of any nature, including but not limited to liability for damage or injury to any persons or property costs and attorney’s fees arising out of or in connection with the use of City recreational facilities regardless of whether the City was actively or passively negligent, either solely or contributory in connection with such liability. I, the undersigned, do hereby agree that we will abide by the policies governing the use of this facility and I will be responsible for any damages to the facility, furniture, or equipment caused by the occupancy of our organization to the premises.

Applicant Signature: __________________________ Date: __________

METHOD OF PAYMENT

MAKE CHECK PAYABLE TO CITY OF SEAL BEACH

☐ CHECK #: __________________________

☐ CASH

☐ VISA ☐ MASTERCARD ☐ (NO DEBIT CARDS) TOTAL CHARGED TO ACCT: $ __________

CARD #: ________-________-________-________

EXP. DATE: __________

SIGNATURE: __________________________ TOTAL CHARGED TO ACCT: $ __________

OVER