

City of Calera  
Application for use of Park Facilities

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

Name: \_\_\_\_\_

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

Phone #'s Home \_\_\_\_\_ Office \_\_\_\_\_ Cell \_\_\_\_\_

Name of Sponsor/Organization: \_\_\_\_\_

Address of Sponsor/Organization: \_\_\_\_\_

Type of Organization: Private \_\_\_\_\_ Non profit \_\_\_\_\_ Government \_\_\_\_\_

Other \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

Facility requested for use: \_\_\_\_\_

Day of Use: \_\_\_\_\_ Time: from \_\_\_\_\_ to \_\_\_\_\_

Will this event be: private no charge \_\_\_\_\_ Private charge \_\_\_\_\_  
Public no charge \_\_\_\_\_ Public admission \_\_\_\_\_  
Public donation \_\_\_\_\_ If public donation to whom \_\_\_\_\_

Special set up requirements: yes \_\_\_ no \_\_\_ utilities or buildings needed: yes \_\_\_ no \_\_\_

If yes explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Anticipated Attendance for event \_\_\_\_\_

Does Organization have any Bylaws, Policies or rules and regulations established for the organization and/or event being held? \_\_\_\_\_  
(All copies of the bylaws, policies, rules and regulations must be submitted with application)

Does Organization have liability insurance for this event? \_\_\_\_\_

Any other information in which the Parks and Rec. Dept and its Governing Body shall find reasonably necessary to a fair determination as to whether a permit should be issued for requested event?

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I hereby certify that I, the undersigned, am authorized to act on behalf of the above name organization/group, that I have read, and understand rules and regulations governing the use of the City of Calera's Park facilities as stated in the City of Calera's Parks and Recreations Policy Manual and that the above named organization/group, its officers and members agree to hold the City of Calera Parks , its officers, employees, agents and its governing body free and harmless from any obligation, debt, claim or responsibility in connection with said use of the city's facilities and for said program event.

Signature \_\_\_\_\_ Date \_\_\_\_\_

You will receive a "use permit" Confirming the reservation of the facility you have selected. If there are any problems with the dates or times you have selected, you will be notified.

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved By \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Insurance by Applicant \_\_\_\_\_ Insurance by City of Calera

	Fee	Account Number
Rental	\$ _____	_____
Staff	\$ _____	_____
Security	\$ _____	_____
Insurance	\$ _____	_____
Clean Up Deposit	\$ _____	_____

Total Fee of \$ \_\_\_\_\_ must be paid by(date of) \_\_\_\_\_ to City hall cashier

Comments \_\_\_\_\_  
\_\_\_\_\_