



# Livermore Area Recreation and Park District FACILITY RENTAL REQUEST APPLICATION

This Facility Request Application must be submitted with the application fee. A signed original is required for processing.  
Please complete all items below. Incomplete requests will be returned without confirmation.

Date of request: _____	
<b>REQUESTED FACILITY / DATE INFORMATION</b>	
Facility Requested: _____	Room(s): _____
Requested Use Date(s): _____	Day(s) of Week: _____
Alternate Use Date(s): _____	Day(s) of Week: _____
Rental Hours: _____ am/pm - _____ am/pm	Event Hours: _____ am/pm - _____ am/pm
NOTE: "Rental Hours must include all time needed for decorating/set up, "main event" and clean up	

<b>PRIVATE/INDIVIDUAL EVENT INFORMATION:</b>			
Name of Responsible Party: _____			
Address: _____		City/State: _____ Zip: _____	
Phone Number: (hm) _____	(wk) _____	(cellular) _____	
(fax) _____	email address: _____		

<b>ORGANIZATION / COMPANY EVENT INFORMATION:</b>			
Name of Organization/Company: _____			
Contact Person: _____		Title: _____	
Alternate Contact Person (if applicable): _____		Title: _____	
Address: _____		City/State: _____ Zip: _____	
Phone Number: _____	Ext: _____	(fax) _____	
email address: _____			
Non-profit tax ID# _____			
NOTE: If claiming non-profit status, please attach appropriate documentation for verification purposes.			

<b>EVENT INFORMATION</b>						
Type of Event:	_____					
(circle one)	meeting	seminar/workshop	party	wedding/reception	fundraiser/benefit	other
Estimated Attendance:	_____					
Frequency of Event (circle one)	One Time	Daily	Weekly	Monthly		
Please circle all that apply below:						
Admission/Donation Charged?	YES	NO				
Food Served?	YES	NO				
	If food is served/sold, is it part of a ticket/fee charged?				YES	NO
Food Sold?	YES	NO				
Food Catered?	YES	NO				
Alcohol Served?	YES	NO				
Alcohol Sold?	YES	NO				
	If alcohol is served/sold, is it part of a ticket/fee charged?				YES	NO
Alcohol Catered?	YES	NO				
Music to be Played?	YES	NO	Amplified?	YES	NO	
Acoustic?	YES	NO	DJ/Band?	YES	NO	
Insurance to be provided by:	_____ Own Policy	_____ Organization/Company Policy	_____ LARPD Policy			



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**All items below MUST be initialed prior to request being considered**

initial \_\_\_\_\_ I have read the LARPD Rules and Regulations for the facility (ies) I have requested, and agree to, and will abide by those rules and regulations before, during and after the event.

initial \_\_\_\_\_ "If I, the applicant, am not the Responsible Party for this request/event, I represent and warrant that I am authorized to execute this application on behalf of the Responsible Party."

initial \_\_\_\_\_ I understand that in an emergency or for reasons beyond the control of LARPD, LARPD reserves the right to cancel any scheduled event prior to scheduled use without liability. A full refund will be granted in the event the reservation is cancelled, in writing, by LARPD

initial \_\_\_\_\_ I understand that any cancellations or changes to this application, once submitted, must be done in writing to the Facilities Coordinator, by the person who signed the contract, prior to the event date, AND that penalties may apply.

initial \_\_\_\_\_ I understand that the application fee is refundable (1) full refund if request is cancelled, in writing, within 48 hours of submission, (2) refunded, less a \$50.00 administrative charge, after 48 hours AND within seven (7) business days of a written request for cancellation and (3) non-refundable after seven (7) business days of submission.

initial \_\_\_\_\_ I understand that one-half of the paid facility rental fee is refundable, if cancellation is requested in writing, within 120 days prior to the event date, less the application fee. I further understand that for cancellations within 120 days prior to the event date, no portion of the paid facility rental fees will be refunded.

initial \_\_\_\_\_ I understand that I shall be liable for any and all costs for services already performed that are associated with this request, including reasonable attorney/legal fees, if necessary.

initial \_\_\_\_\_ I understand that if alcohol is to be served at the event, I must inform LARPD, in writing, prior to the event.

initial \_\_\_\_\_ I understand that if alcohol is to be sold at the event, I must inform LARPD and obtain the proper documentation and permits from LARPD, the Livermore Police Department and the Alcoholic Beverage Control Agency (ABC,) AND that additional fees may apply.

initial \_\_\_\_\_ I understand that all balances of the total rental fee are due within thirty (30) days from the date of my event, AND that I could be subject to penalties and/or additional fees if not paid by the deadline date.

initial \_\_\_\_\_ I understand that there is a liability insurance requirement for this rental, and that I will either purchase Special Event Insurance through LARPD, or provide my own policy through private homeowner's or business insurance at least 30 days prior to my event date.

I certify that the information above is accurate and correct. I have read the rules and regulations pertaining to the use of LARPD facilities and will (1) be responsible for all injuries caused by such use, (2) adhere to the rental hours agreed to through the signed contract and (3) reimburse LARPD for and loss or damage to LARPD equipment/property caused by such use. In consideration of participation as specified at the location requested, for the date(s) and time(s) requested, I do hereby release and hold harmless LARPD from any and all liability or claims for damage or injury to person or property of the undersigned due to permittee's use of said facility(ies), by reason of any act or omission by the LARPD or any of its officers, agents or employees or the condition of its property.

\_\_\_\_\_  
Print Name of Responsible Person

\_\_\_\_\_  
Signature of Responsible Person

<b>For LARPD Use Only</b>	
Date Submitted:	_____
Payment:	Cash _____ Check # _____
Receipt #:	_____