



**COMMUNITY PARK USE APPLICATION/PERMIT**

6000 Heritage Trail  
Clayton, CA 94517  
(925) 673-7300

Applicant/Contact Name: \_\_\_\_\_

Organization's Name: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_

Description of Activity: \_\_\_\_\_

Anticipated Attendance: \_\_\_\_\_

Will alcohol be served or sold at this function?  No  Yes (Requires separate City Permit)

Is this a public or community event?, "  Yes  No

Will food or beverage be served (given away or sold)?\*  Yes  No

(\*If yes to both of these questions a temporary food facility permit from Contra Costa County Environmental Health is required and proof of this must be supplied before final approval of the city rental application. See [www.cchealth.org/EH.](http://www.cchealth.org/EH.))

**Group Picnic Areas:**  #1  #2  #3  #4  #5 *Clusters*  
 #6 *Large Group Picnic Shelter*  #5 & 6 *Combo*  #7

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

Hours of Use: From \_\_\_\_\_ am / pm To \_\_\_\_\_ am / pm

**Ball fields:**  Field #1  Field #2  Field #3  Field #4

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

Hours of Use: From \_\_\_\_\_ am / pm To \_\_\_\_\_ am / pm

**Fees: Note: All fees are due at time of application. Make checks payable to City of Clayton**

The undersigned hereby agrees to be responsible for the repair of any damage to the facility occurring during and by this use, and agrees to be responsible for the conduct of all persons attending this function. Applicant further agrees to execute the required City of Clayton Hold Harmless Agreement, and to submit to the City any required certificates of insurance. The undersigned has received a copy of the Park Use Policies and agrees to comply with the rules and regulations therein.

\_\_\_\_\_  
Applicant/Designated Representative

\_\_\_\_\_  
Date

## Hold Harmless Agreement

As applicant, or an officially authorized representative of the applicant, agree that as a condition of use of the City of Clayton Park Facilities, the applicant hereby agrees to, and shall defend, indemnify and hold the City of Clayton, its officials, officers, directors, employees, volunteers and agents harmless from and against any or all loss, liability, expense, claim, costs, suits and damages of every kind, nature and description, directly or indirectly, arising from usage or activities for which Community Park Use Permits are granted.

\_\_\_\_\_  
Applicant/Designated Representative

\_\_\_\_\_  
Date

### City of Clayton Use Only

Category:       Resident       Non Resident       Commercial       Community

Picnic Area # \_\_\_\_\_ # of hours \_\_\_\_\_ @ \$ \_\_\_\_\_ per hour = \$ \_\_\_\_\_ 101-5602-00

Picnic Area # \_\_\_\_\_ # of hours \_\_\_\_\_ @ \$ \_\_\_\_\_ per hour = \$ \_\_\_\_\_ 101-5602-00

Ball Field # \_\_\_\_\_ # of hours \_\_\_\_\_ @ \$ \_\_\_\_\_ per hour = \$ \_\_\_\_\_ 101-5602-00

Ball Field # \_\_\_\_\_ # of hours \_\_\_\_\_ @ \$ \_\_\_\_\_ per hour = \$ \_\_\_\_\_ 101-5602-00

Alcohol Permit = \$ \_\_\_\_\_ 101-5302-00 #AP

Noise Permit = \$ \_\_\_\_\_ 101-5301-00 #NP

TOTAL FEES = \$ \_\_\_\_\_

Receipt #: \_\_\_\_\_

**Note: Limitations and penalties may apply for late cancellations, except for rain outs when an acceptable alternate date is unavailable.**

- Hold harmless agreement signed.
- Signed park rental policy received.
- Proof of insurance received/attached (only if serving alcohol)
- Copy of identification (i.e. driver's license, photo ID)

Adjustment of rental fees approved by: \_\_\_\_\_

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

Application / Permit accepted by: \_\_\_\_\_

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