



Dunne Park Clubhouse

Facility Rental Form
831-636-4390

REQUESTED DAY OF USE

		To	
Day	Date		Actual Time of Use

CONTACT PERSON

Name: _____
 Address: _____
 City: _____
 Home/Cell Number: _____
 Work Number: _____
 EMAIL: _____

CLUB/ORGANIZATION INFORMATION

Name: _____
 Address: _____
 City: _____
 Contact Person and Title: _____

 Address: _____
 City: _____
 Home Number: _____
 Work Number: _____
 Fax Number: _____
 EMAIL: _____

EVENT INFORMATION

Type of Event: _____
 Setup time: _____ to _____
 Time of use: _____ to _____
 Cleanup time: _____ to _____
 Total # of hours in use: _____
 Number of Guests: _____
 Number of Adults: _____
 Number of Youths: _____
 Will food be served? Yes No

ALCOHOL PROHIBITED

Initials

Will an inflatable jumping
 structure be present? Yes No
 Admission charge? Yes No

STATEMENT OF LIABILITY

It is the express condition of this permit that the City of Hollister its officers, agents, contractors and employees, shall be free from any and all death or deaths of or any injury of injuries to any person or property or causes whatsoever while in or upon said premises or any part thereof during the term of this permit or occasioned by any occupancy or use of said premises or any activity carried on by Permittee in connection save harmless the City, its officers, agents and employees, from all liabilities, charges, expenses (including counsel fees) and costs of account of, or by reason of, any such death or deaths, injury or injuries, liabilities, claims, suits or losses however occurring, or damage growing out of the same.

Date: _____

Signature: _____

PROHIBITED ACTIVITIES

THE FOLLOWING ACTIVITIES ARE PROHIBITED IN THE DUNNE PARK CLUBHOUSE FACILITY: (Lo siguiente esta PROHIBIDO en la instalacion de Dunne Park)

1. **Possession and/or consumption of alcoholic beverages.** (Poseción y consume de bebidas alcohólica)
2. **Playing loud or amplified music.** (Musica fuerte o amplificada)
3. **Placement of decoration on facility walls.** (Colocar decoracion en las paredes)
4. **Burning of any items, wood or trash in the fireplace.** (Quemar vasura o uso de chimenea)
5. **Placement of coffee grounds in drain of kitchen sink.** (Disponer café molido en el lavamanos)
6. **No smoking in the facility.** (No fumar dentro de la instalacion)
7. **No balloons.** (No globos permitidos)
8. **Renter is not allowed to enter clubhouse prior to rental date**
(Inquilino no se le permitira entrar en la facilidad antes del dia de renta.)

Initials

CLEAN-UP RESPONSIBILITIES

PLEASE PERFORM THE FOLLOWING CLEAN-UP RESPONSIBILITIES BEFORE VACATING DUNNE PARK CLUBHOUSE FACILITY: (Por favor realize las siguientes responsabilidades de limpieza antes de desocupar la facilidad de Dunne Park Clubhouse)

1. **Sweep and mop; including the kitchen and restrooms. Renter must provide own cleaning products for floor and kitchen counter.** (Barrer y trapiar: incluyendo la cosina y baños. Inquilino tendra que proporcionar sus productos de limpieza para el piso y el mostrador.)
2. **Clean sink and stove in kitchen.** (Limpiar lavamanos y estufa en la cosina.)
3. **Clean tables and chairs before putting away.** (Limpiar mesas y sillas antes de guardarlas.)
4. **Put all garbage in back porch gated area outside of the facility.** (Ponga la basura afuera en el porche, atras en la area cercada.)
5. **All clean-up must be completed and vacate premises by 10:00pm.** (La limpieza tiene que ser completada y salir del local a las 10:00pm.)

HAVING READ THE STATEMENT OF LIABILITY, PROHIBITED ACTIVITIES AND CLEAN UP RESPONSIBILITIES ON THE REVERSE SIDE OF THIS FORM AND UPON SUBMITTING THE ABOVE REQUEST FOR USE OF THE CITY OF HOLLISTER FACILITY, WE/I AGREE TO ABIDE BY AND ENFORCE ALL RULES AND REGULATIONS OF THE CITY OF HOLLISTER AND THE RECREATION DIVISION WHICH PERTAIN TO USE OF THE FACILITIES REQUESTED, AND TO BE RESPONSIBLE FOR ITS FACILITIES IN THE SAME CONDITION IN WHICH RECEIVED AND TO REIMBURSE THE CITY OF HOLLISTER THROUGH FORFEITURE OF DEPOSIT AND/OR ADDITIONAL REIMBURSEMENT FOR ANY LOSS OR DAMAGE. DEPOSIT WILL ALSO BE FORFETTED IF KEY IS LOST.

Date: _____ **Signature:** _____

NOTICE ON INSURANCE PREMIUM

INSURANCE COVERING THE CITY OF HOLLISTER FOR \$1,000,000.00 MUST BE PRESENTED BEFORE THE RENTAL. IF EVENT HOLDER PURCHASES INSURANCE THROUGH THE CITY OF HOLLISTER AND THE EVENT HOLDER CANCELS THE EVENT THEREAFTER, INSURANCE PAYMENT WILL NOT BE REFUNDED.

Sign: _____ **Date:** _____