Rio Linda Elverta Recreation and Park District

810 Oak Lane * Rio Linda, CA 95673 * 916-991-5929 * On Call 916-757-4523 (after hours)

INDOOR/OUTDOOR FACILITY USE PERMIT

Reservation Information (Please print clearly)

1. Type of Event: _____
2. Facility Requested: ___ Community Center ___ Depot
3. Kitchen ___ YES ___ NO For Meeting's ONLY ___ Rio Room ___ Elverta Room ___ Linda Room
4. Date(s) Requested: _____ _____ _____
5. Time of Event: _____am / pm Until _____am / pm Number of hours: _____ Approx. # of people: _____
6. Person in Charge (Permittee): _____ Phone #: _____
7. Address: _____ City/Zip: _____ Email: _____
8. Alternate Person in Charge: _____ Phone #: _____

Will you be selling, serving or furnishing any food, beverage or snack items? _____ YES _____ NO
Will you be serving or furnishing any alcoholic beverages? _____ YES _____ NO
Will you be selling/furnishing any alcoholic beverages? _____ YES _____ NO
Will you be using any type of sound amplification equipment? _____ YES _____ NO
Will you be charging any entry fee or selling tickets to attend this event? _____ YES _____ NO
Will this event be open to general public? _____ YES _____ NO
Will you be placing any signs, ropes, banners, or other items on District property? _____ YES _____ NO
Will a commercial caterer be used? If so, name: _____ _____ YES _____ NO

IMPORTANT! PLEASE READ CAREFULLY BEFORE SIGNING:

The applicant (and his or her organization) is solely responsible for any damages, accidents or injuries to persons or property resulting from the use of Rio Linda Elverta Recreation and Park District facilities or parks. Any applicant obtaining a permit shall be responsible for the control and supervision of the people in attendance during the use of the building and /or park and shall take care to see that no damage is done to the furniture or fixtures. Any violation of this provision can result in a denial of further permits and financial reimbursement for the repair or replacement must be made upon demand. The responsible party must be present at the time of the rental and must present a copy of this permit upon entry.

I/We, the undersigned, have read and hereby agree to abide by the above provisions, and all rules and regulations.

Initial:_____

To be Completed by District Staff Only

Rental Fee: $ _____ Paid [ ]
Reservation Deposit: $_____ Paid [ ]
Refundable Deposit Fee: $ _____ Paid [ ]
Kitchen Use Fee: $ _____Paid [ ]
Refundable Kitchen Fee: $ _____Paid [ ]
Security Guards: $ _____ Paid [ ]
Extra Hours: $ _____ Paid [ ]
Other: $ _____ Paid [ ]

This permit has been approved:

By: _____Date: _____

Deposit Returned: [ ] Yes [ ] No
Amount: $_____ Charges: $_____
*Deposit will be sent to the address listed above within 3-4 weeks.

Total Due: $ _____ Paid [ ] **Date Due By: _____**

PLEASE HAVE THIS PERMIT WITH YOU AT ALL TIMES DURING WHICH THE EVENT IS TAKING PLACE

Emergency number: 911 or Non-emergency number: 874-5115