

CITY OF CLAYTON
COMMUNITY PARK USE APPLICATION / PERMIT

(Single Use Only)

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)

Group Picnic Areas:

- | | |
|---|---|
| <input type="checkbox"/> Marsh Creek (#1) | <input type="checkbox"/> Diablo View (#4) |
| <input type="checkbox"/> Marsh Creek (#2) | <input type="checkbox"/> Lower Creek (#5) |
| <input type="checkbox"/> Vista Point (#3) | <input type="checkbox"/> Upper Creek (#6) |

Date Requested: _____

Hours of Use: From _____ am / pm To _____ am / pm

Ballfields:

- Field #1 Field #2 Field #3 Field #4

Date Requested: _____

Hours of Use: From _____ am / pm To _____ am / pm

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.

Signature of Applicant/Designated Official

Date

Hold Harmless Agreement

As applicant, or an officially authorized representative of the applicant, I 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 Official Date

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

Category: Resident Non Resident Commercial Community

Picnic Area # _____: 11am - 3pm @ \$ _____ 3pm - 7pm @ \$ _____ = \$ _____

Picnic Area # _____: 11am - 3pm @ \$ _____ 3pm - 7pm @ \$ _____ = \$ _____

Ballfield # _____: # hours _____ @ \$ _____ per hour = \$ _____

Ballfield # _____: # hours _____ @ \$ _____ per hour = \$ _____

Alcohol Use Permit = \$ _____

Noise Exception Permit = \$ _____

TOTAL FEES = \$ _____

Note: Fees are non-refundable, except for rain outs when an acceptable alternate date is unavailable.

Total fees received \$ _____

Receipt # _____

Hold Harmless agreement signed.

Certificate of Liability Insurance received / attached (only if serving alcohol)

Copy of Identification (i.e. driver's license, photo ID)

Application / Permit accepted by: _____

Date: _____