

TOWN OF DISCOVERY BAY COMMUNITY SERVICES DISTRICT

PARK RESERVATION & USE PERMIT APPLICATION

LOCATION						
CORNELL PARK						
□ Shaded Picnic Area □ Baseball Field □ Soccer Field □ Bocce Ball Court □ Horseshoe Pits □ Pickle Ball Court						
RAVENSWOOD PARK						
□ Covered Picnic Area #1 □ Covered Picnic Area #2 □ Soccer Field						
EVENT						
Date Submitted: Event Date:						
Set up Times: to to to to to to to						
Estimated Attendance:						
☐ Jump House – If yes, name of company Phone number						
No Alcohol No Food Trucks/Carts Initials Initials						
If alcohol is on site, this may be reason to forfeit depositSignature						
CONTACT						
Name/ Organization:						
Address: E-mail Address:						
Main Contact: Phone Number:						
Secondary Contact: Phone Number:						

The rental fee and deposit are due the day you make your reservation. The rental fee may be paid by check, money order, cash, Visa or Mastercard. The damage deposit is required to be paid separately from the rental fee by check or money order made payable to the "Town of Discovery Bay CSD." Park Rental cancellations occurring five (5) business days or more prior to the event will be refunded all fees and deposit(s). Cancellations occurring four (4) business days or less prior to the event will forfeit all applicable fees but be refunded all of the deposit.

NO ALCOHOL IS ALLOWED AT ANY PARK

		For Accoun	ting Use		
Rental Rate:	Deposit Ar	nount:	Deposit Ck i	#	
Number of Hours:	Date Rental	Fee Paid:	Ck #	🗆 c	ash 🗆 Credit Card
Total:					
Staff Signature:		Date:			
Fee Waiver Approved by To	wn General M	anager:		Date	:
	WA	IVER, RELEAS	E & INDEMNITY		
Waiver, Release and Indemnity Agreemen of the Organization/Group and that he/she application is to request usage of a Park at because of the occupancy of said premises Bay CSD for any damage arising from the understand the rules, regulations and poli and policies of the Town of Discovery Bay CSD hold the Town of Discovery Bay CSD hold the Town of Discovery Bay CSD, it offilegal expense that may arise during or be Agreement is binding on my heirs and assistance.	e or the Organization rea and accept perso by myself or my Orge use of said Park, a cices for use of the Pay CSD governing the shall result in the incicers, employees, the e caused in any way igns. By signing below	J/Group will be bound nal responsibility for ganization/Group. I, nd costs and/or atteark area. I agree to a use of the Park area. Immediate loss of priviindividual members by such use or occup with a pplicant agreement.	d to the terms of the Agrical damage sustained and/or my Organization/Groprneys' fees, if any, incubide by, inform my Organization and agreleges of use of the Park at thereof, agents, and volupancy of the Park area rees to comply with all	eement by so or cost incubup, agree to urred in coll anization/Ge that failure area and/or unteers, har local, state	uch signature. I hereby understand to rred by the Town of Discovery Bay (a fully reimburse the Town of Discovection. I have received, read and for roup, and enforce the rules, regulations a privileges for future use. I also agreemless from any damage, liability, cost at this Waiver, Release and Indemse, and federal laws.
Applicant Signature:		Date:			_
	FOR	FOR PARKS/LANDSCAPE STAFF ONLY			
Note any Pre-existing damag					
Note any damage or cleaning	g needed to th	ie premises: _			
Deposit Amount:					
Cost on Damages:					
Cost on Cleaning:	-				
Deposit Returned:	-				
Staff Signature:		Date: _		<u></u>	
Renter Signature:		Date: _			