

CORNELL PARK

☐ Pickleball Court #1 ☐ Pickleball Court #2

TOWN OF DISCOVERY BAY COMMUNITY SERVICES DISTRICT

PARK RESERVATION & USE PERMIT **APPLICATION**

LOCATION □ Shaded Picnic Area □ Baseball Field □ Soccer Field □ Bocce Ball Court □ Horseshoe Pits □ Tennis Court RAVENSWOOD PARK ☐ Covered Picnic Area #1 ☐ Covered Picnic Area #2 ☐ Soccer Field **EVENT** Date Submitted: Event Date: _____ Estimated Attendance: _ Jump House – If yes, name of company ______ Phone number_____ □ No Alcohol □ No Food Trucks/Carts **Initials** Initials

CONTACT

Name/ Organization: _____ Address: E-mail Address: Main Contact: _____ Phone Number: _____

Secondary Contact: _____ Phone Number: _____

If alcohol is on site, this may be reason to forfeit deposit _____

Description of event:____

Signature

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, Mastercard, or Discover. The damage deposit is required to be paid separately from the rental fee by check or money order, Visa, Mastercard, or Discover. Checks 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

Revised 5/2023

		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, RELEASI	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 thunderstand the rules, regulations and policies of the Town of Discovery Bay CSD hold the Town of Discovery Bay CSD, it offilegal expense that may arise during or b Agreement is binding on my heirs and asse	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 imicers, 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. I mediate loss of priviindividual members by such use or occuping the park against the policant agreement of the price of the park area.	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 incurred in collanization/Ge that failure and/or unteers, har local, state	such signature. I hereby understand to the treed by the Town of Discovery Bay (to fully reimburse the Town of Discovery East of the Town of Discovery East of the Town of Discovery East of the Toup, and enforce the rules, regulations a privileges for future use. I also agreemless from any damage, liability, cost of the Town of the Town of To
Applicant Signature:		Date:			_
	FOR	PARKS/LAND:	SCAPE STAFF ON	LY	
Note any Pre-existing damag					
, ,	5				
Note any damage or cleaning	g needed to th	ie premises: _			
Deposit Amount:					
Cost on Damages:					
Cost on Cleaning:	-				
Deposit Returned:	-				
Staff Signature:		Date: _			
Renter Signature:		Date: _			