

Application For Use of Facility

Facility Name: David Head But Organization/Applicant/User Requesting Person Physically in charged of event:	Facility:	
Address:	City	Zip
Home Phone:	Work Phone	
Type of Activity for which will be used: _		
Date(s) Requested:	1700	
Date(s) Requested: Number of People Attending:	Alcohol Served / S	Sold? Yes No
Applicant/User, for himself or herself and thereof, agree to abide by the policies and	the above organization procedures stated on	this application.
Applicant/User Signature		Date
SPACE BELOW FOR	OFFICE USE ONL	Y
Damage/Cleaning Deposit Rental Fee	Date Due	Date Received
Insurance Security Alcohol Permit ABC License		
Tables and Chairs		
District Representative Signature/ Appro	oval	Date



Facility Rental Agreement, Waiver, and Release

Applica	ant/Use	er Home Phone:
Address	dress: Work Phone	
Facility	Requ	Work Phoneested: David Head Building
		ested: Senior ctr Hall Board Room Back Rm Kitchen (circle)
Date(s)	Reque	ested:
Time A	rrivin	gam/pm Time Leavingam/pm
		INDEMNIEICATION ACDEEMENT
		INDEMNIFICATION AGREEMENT PERMIT/FACILITY USE AGREEMENT
		RECOMMENDED LANGUAGE FOR INSURANCE RELATED PROVISIONS
A. INDEM	INIFICAT	
RE lial or the mis B. INSURA 1. Ge per CG pro "in	in any way BEAR M sconduct o ANCE RE eneral liabil riod content G 00 01, in operty dam sured cont bility	shall indemnify, defend, and hold harmless BEAR MOUNTAIN ON AND PARK DISTRICT, its officers, employees, and agents from any and all losses, costs, expenses, claims ions, or damages, including liability for injuries to any person or persons or damage to property arising at any time out or related to the
	PA RI cer	ch insurance shall name BEAR MOUNTAIN RECREATION AND PARK DISTRICT, its officers, employees, ents, and volunteers as additional insureds prior to the use of the facility. The
	tra ass late	I insurance policies shall be issued by an insurance company currently authorized by the Insurance Commissioner to insurance or is on the List of Approved Surplus Line Insurers in the State of California, with an igned policyholders' Rating of A- (or higher) and Financial Size Category Class VII (or larger) in accordance with the est edition of Best's Key Rating Guide, unless otherwise approved by the BEAR MOUNTAIN RECREATION AND IRK DISTRICT'S self-insurance pool.

Requirements of specific coverage features, or limits contained in this Section are not intended as a limitation on coverage, limits or other requirements, or a waiver of any coverage normally provided by any insurance. Specific reference to a given

	insured to be all inclusive, or to the exclusion of other	ly as it pertains to a given issue and is not intended by any party or er coverage, or a waiver of any type. If the
	RECREATION AND PARK DISTRICT requires the specified minimum limits of insurance and coverage	limits than the minimums shown above, the BEAR MOUNTAIN and shall be entitled to coverage for the higher limits maintained by Any available insurance proceeds in excess of the ge shall be available to BEAR MOUNTAIN RECREATION AND
	PARK DISTRICT.	
C. COMPLIANO	CE WITH ALL APPLICABLE LAW, RULES, & R	EGULATIONS shall comply with all local, state, and federal laws and regulations
related to	the use of the facility and public gatherings.	shall comply with all local, state, and federal laws and regulations
2. Ine	lity standards and regulations.	agrees to abide by all applicable local, federal, and state
3. The		further agrees that it is solely responsible for reviewing and
facility in	ncluding, but not limited to, physical distancing, limits of IOUNTAIN RECREATION AND PARK DISTRIC	ulations, orders, and/or guidance in effect at the time of the use of the on the size of gatherings, use of appropriate sanitation practices, etc. Treserves the right to immediately revoke
	tan to comply with any provision of this s	cotton.
shall be p Majeure regulation	ATION AND PARK DISTRICT shall be excused from the performance of such obligations by Event" includes but is not limited to fires, floods, earn of any public authority, and other causes beyond their waives any right of recovery against BEAR MOUNT.	contrary contained in this agreement, the BEAR MOUNTAIN om its obligations under this agreement to the extent and whenever it any Force Majeure Event. For purposes of this agreement, a "Force rthquakes, pandemic, epidemic, civil disturbances, acts of terrorism, control. The
FULLY UND LIABILITY A	ERSTAND ITS CONTENTS. I AM	EEMENT, WAIVER, AND RELEASE AND AWARE THAT THIS IS A RELEASE OF YSELF AND THE BEAR MOUNTAIN GN IT OF MY FREE WILL.
Applica	ant/User Signature	Date
District Re	epresentative Signature/ Approv	val Date



Applicant/ User Responsibilities

1.	Application Fee is as follows: \$\text{per hour up to 6hrs or } \text{per day}			
	Fee is due on			
2.	Damage/Cleaning Deposit: \$ is due at the time application is submitted.			
	Deposit will be refundable less any charges for clean up or damage within			
	approximately 45 days following the activity.			
3.	Selling Alcohol: A copy of liquor license issued by the California Alcoholic Beverages Control Board is due at Bear Mountain Recreation and park District on			
4.				
	Recreation and Park District by			
5.	Security: Security application is due on to Bear Mountain Recreation and Park District.			
6.	Insurance: A certificate of insurance of \$2,000,000.00 listing Bear Mountain Recreation and Park District, its governing board, officers, employees, and agents as additional insured for the scheduled activity is due when requested by the District.			
7.	No Smoking: There shall be NO SMOKING ALLOWED IN ANY OF THE			
	FACILITIES.			
8.	Set-up/Clean-Up: You have a 15 minute "grace period" for your scheduled arrival time after which the custodial staff may write you up as a "no show," and leave. You should allow for set-up and clean-up within your schedule arrival and departure times.			
9.	Check-In/Check-Out: All Applicants/Users are required to sign a check-in/check-out from verifying the condition of the facility before and after use. The person signing should sign both check-in and check-out forms, and must be 18 years of age or older.			
	Do not leave the facility unattended: If your function ends earlier than scheduled, you may phone the custodial staff to come and check out the building. If you are unable to reach him/her, someone must wait at the facility until the scheduled check-out time. Remember: YOU are liable for any damage or loss that is noted by the custodial staff on the check-out form.			
	ant/User, for himself or herself and the above organization and all members thereof tand, and agree to abide by the stated "Applicant/User Responsibilities" stated above.			
A	pplicant/User Signature Date			



Security Application

Activity:				
Date(s) Requested:	Facility: D	Facility: David Head Building		
Person Physically in charged of e	vent:			
Address:	City	Zip		
Home Phone:	Work Phone			
Security is required at a minimum of or children). 2 Guards must be present from 6pm				
2:00 am or until the last person leave				
The agency named below certifies	s that it has contracted	to provide security service		
for the above event as follows:				
Guards from	_am/pm to	am/pm <u>AND</u>		
Guards from	_am/pm to	am/pm		
We agree to notify Bear Mountain immediately if this contract is can		District at (661) 845-0757,		
Agency:				
Address:				
Phone:				
State License:				
Signature of Agency Representat	tive	Date		