

# PICNIC FACILITY RENTAL FORM

Parks and Recreation Services  
 1500 Jefferson Street, Napa, CA 94559  
 707-257-9529



Name:		Date:		DOB:	
Organization:					
Phone:			Email:		
Address:		City:	State:	Zip:	
Estimated Attendance:			Type of Activity:		
Electrical Access: <input type="checkbox"/> Yes <input type="checkbox"/> No			Non-profit: <input type="checkbox"/> Yes <input type="checkbox"/> No 501c3 # _____		
Alcohol served or consumed: <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, Purchasing our Insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Alcohol Service Start Time:		End Time:		(Alcohol service must end ½ h before clean-up)	
Park Name & Picnic Area	Day	Date	Start Time	End Time	Total Hours
<b>OFFICE USE ONLY:</b>				Picnic area rental rate:	
				Insurance fee:	
				Non-resident fee:	
				Other charges:	
				Total rental fees:	
Balance amount: \$			Balance due date        /        /		

I have received and read the picnic rentals rules and regulations provided by the Parks and Recreation Services Department. As the applicant, I hereby agree to comply with the City and State Laws and Rules and Regulations. Non-compliance of the rules and regulations may result ejection from the facility, denial of future reservation and/or charges for damages. As the applicant, I agree to hold harmless and indemnify the City of Napa and it's officers, employees, and agents for any loss, damage, liability, cost or expense arising from the use or occupation of the park, facilities and equipment relating to this application. The cost of any special cleaning or damage to the facility, equipment, or grounds, due to the event, will be charged to the applicant.

\_\_\_\_\_  
 Signature of applicant

\_\_\_\_\_  
 Date

**OFFICE USE ONLY:** Permit #: \_\_\_\_\_ Date Entered in Civic Rec: \_\_\_\_\_ Insurance:  Yes  No

Comments: \_\_\_\_\_