

Staff Use Only: Permit: _____ Date of Use: _____
 Time of Use (include set-up and take-down): From _____ AM/PM to _____ AM/PM
 Last Name, First Name _____ Phone Number _____
 Deposit \$ _____ Date: _____ FOP _____ Fee \$ _____ Date: _____ FOP _____
 Pool Hours Confirmed _____ by email or verbally



Facility Rental Application – CRC Party Rooms

1. I, _____, representing _____
 (Name of Individual) (Organization, if applicable)

request permission to RENT the following facility (check applicable boxes):

PARTY ROOM Straight Hourly Rent	Rent \$50/per 2 hours Deposit: \$ 50.00 <input type="radio"/>	Note: Straight Room Rental does not include access to any other facility amenity other than the Party Room reserved.		
	Up to 8 Patrons	9 – 16 Patrons	17 – 24 Patrons	25 – 32 Patrons
Rental Plus	\$70/per 2 hours \$60 Deposit <input type="radio"/>	\$100/per 2 hours \$80 Deposit <input type="radio"/>	\$130/per 2 hours \$110 Deposit <input type="radio"/>	\$160/per 2 hours \$130 Deposit <input type="radio"/>
Birthday Package	\$90/ per 2 hours \$60 Deposit <input type="radio"/>	\$130/per 2 hours \$80 Deposit <input type="radio"/>	\$260/per 2 hours \$110 Deposit <input type="radio"/>	\$350/per 2 hours \$130 Deposit <input type="radio"/>
Deluxe Birthday Package	\$130/per 2 hours \$60 Deposit <input type="radio"/>	\$200/per 2 hours \$80 Deposit <input type="radio"/>	\$320/per 2 hours \$110 Deposit <input type="radio"/>	\$440/per 2 hours \$130 Deposit <input type="radio"/>
Set Up/ Take Down After Hours	\$25.00 per room \$25.00 additional for each hour after closing			
PARTY ROOM Requested (based on availability)	Party Room A <input type="radio"/>	Party Room B <input type="radio"/>	Party Room All <input type="radio"/>	

Open swim hours on day of event: _____ am/pm to _____ am/pm

2. Day/Date requested _____ Arrival Time _____ Leave Time _____

3. The purpose of this use will be: _____
 (Meeting, Reception, Party, Fundraiser, etc.)

4. Anticipated attendance: ADULTS _____ YOUTHS (under 18) _____ TOTAL _____

5. What time will guests arrive? _____ What time will guests leave? _____
 If your event is held after hours a \$25 per hour charge will be added.

6. Is this event open to the public? _____

7. Will there be any admission charge, sale, solicitation, donation, or collection involved with your use? _____
 If yes, explain: _____

8. Equipment or services requested (Contingent upon availability):

of chairs _____ # of tables _____ PA System _____ Microphone _____ Projector _____

9. Will there be decorations? _____ If yes, explain: _____

Anything that is attached to walls, tables, etc. must be hung with blue painter's tape. All tape used must be removed prior to vacating room(s).

10. Will there be amplified sound? _____ If yes, explain: _____

11. Will there be food at the event? _____ If yes, explain: _____

12. Will your use require the placing of signs, flyers or posters on City property? _____

13. Will other services be used [DJ, performer(s), speaker, etc.]? _____

If so, please explain: _____
(City of Cottonwood may require Certificate of Insurance with Endorsement)

For Party Package Rentals Only

Name of Birthday Individual: _____ Age: _____

Theme: (choose one of the following): Happy Birthday Theme (color(s): _____)

Spiderman

Princess

Hawaiian

Special Theme Request (**\$20 additional fee and based on availability**): _____

Type of Cake: (choose one) Chocolate White Marble

Type of Frosting: (choose one)

Whipped Cream

Chocolate Buttercream

Vanilla Buttercream

Flavor of Ice Cream: (choose one) Strawberry Chocolate Vanilla

Text for Cake: _____

Text for Banner (*Deluxe Package only*): _____

Party Room Information

Straight Room Rental: This rental does not include the usage of any facility amenities.

Rental Plus: This rental includes usage of the facility amenities.

Birthday Party Package: This rental includes usage of the facility amenities, as well as a choice of 3 different themes when booking the facility. Cake, ice cream, punch, and all tableware is included. (*Minimum 2 week reservation notice*)

Deluxe Birthday Package: This package includes everything in the above package as well as balloons, personalized banner, and hats. (*Minimum 2 week reservation notice*)

Initial _____ I understand that in case of emergency or for reasons beyond the City's control, the City reserves the right to cancel the scheduled event prior to scheduled use without liability. Refunds will be made if cancellation by the City is necessary. Likewise, certain areas and/or amenities may be forced to close with little or no notice due to mechanical, chemical, or environmental issues (including lightning). Refund requests will be assessed on a case by case basis in these situations.

Initial _____ I understand that submittal of this application does not guarantee a reservation. Only after all documents have been received and all required payments are made will a reservation be confirmed.

Initial _____ I have received, read and understand the information contained in the Cottonwood Recreation "Facility Rental Policies and Guidelines" Packet.

Initial _____ I understand that my reservation includes set-up and clean-up times of ½ hour prior to and ½ hour post my event. Additional time will be paid for by extending reservation time.

Initial _____ I understand that if a cancellation needs to occur, the rental party will be subject to cancellation fees as listed below:

Cancellations made 30 days in advance or more: 0%
Cancellations made less than 30 days in advance: 10%
Cancellations made less than 7 days in advance: 30% OR set up fee; whichever is greater

It is distinctly understood and agreed that the applicant assumes all risks for loss, damage, liability, injury, cost or expense that may arise during, or be caused in any way by, such use or occupancy of the facilities of the City of Cottonwood and/or Recreation Section. The applicant further agrees that in consideration of being permitted to use the facilities, he/she will save and hold harmless the City of Cottonwood and/or its employees from any loss, claims, and liability or damages, and/or injuries to persons and property that in any way may be caused by applicant's use or occupancy.

I, the undersigned, hereby certify that I will be personally responsible on behalf of the applicant of any damages/loss sustained by the grounds, building, furniture or equipment, or unusual clean-up required through the occupancy of said facilities by the applicant. I am aware that liability insurance may be required in certain situations, naming the City of Cottonwood as Additional Insured.

Date Completed Please Print Name Signature

Number and Street City State Zip Primary Phone

Driver's License # Date of Birth E-mail

Name of Alternate Contact Person for Event Phone

Staff Signature Staff Printed Name Date

Cottonwood Recreation Center currently accepts payment in the form of cash, Visa, Master Card, and checks made out to The City of Cottonwood. No out-of-state personal checks will be accepted.



Day & Date of Event _____

Time (including set-up) _____

Name of Party Contact: _____

Rooms Requested: PR A ___ PR B ___ PR A & B ___

Party Room Rental Type: _____

#of people attending: _____

of chairs needed: ___ # of tables needed: ___ Setup by CRC Yes ___ No ___

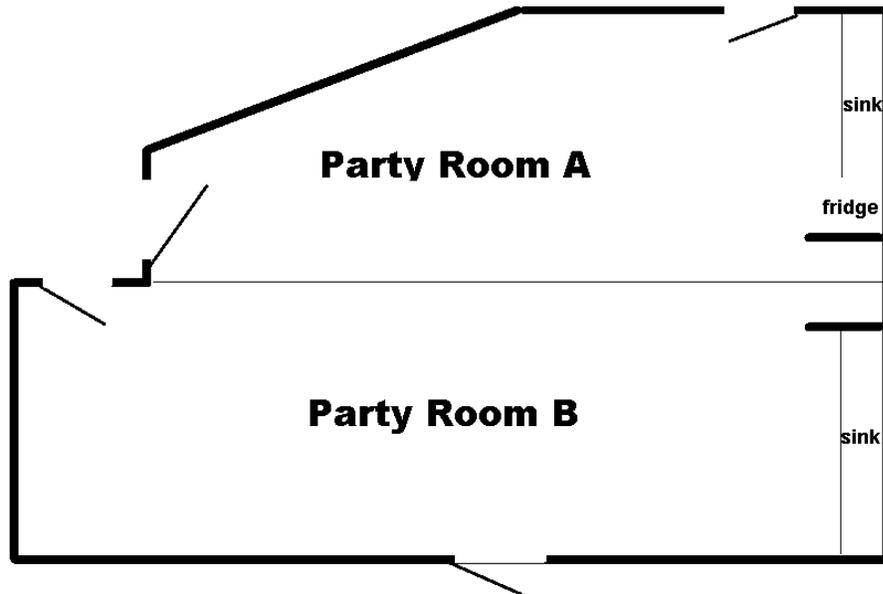
(\$25 per room fee applies & does not include cleaning of room or equipment)

Liability Insurance Yes ___ No ___ Projector Yes ___ No ___ Microphone Yes ___ No ___

Do you require conference call capabilities? Yes ___ No ___

Special Requests _____

**Cleaning Supplies are located under the sink of each room
If Set-Up is requested this form must be turned in 48 hours prior to event**



I the customer acknowledge that the set-up request above is correct. Any changes to this request are subject to a deposit reduction.

Signature _____ Date _____

FOR OFFICE USE ONLY:

Theme: _____ Colors _____

Cake: _____ Frosting: _____ Ice Cream: _____

Cake: ¼ Sheet ½ Sheet Text for Cake: _____

Text for Banner (Deluxe Pkg Only): _____

Cleaning Deposit Checklist

Amount of Deposit Paid: _____\$

The following items will be checked by Cottonwood Recreation Center staff for completion before any part of your security/cleaning deposit is returned:

_____ Tables & Chairs to be wiped down and returned to storage area

_____ Exterior doors closed & locked

_____ Carpeted areas vacuumed

_____ Counters, sinks and appliances wiped down

_____ Glass cleaned if necessary

_____ All tape is removed from tables, table legs, partition, doors, etc.

_____ Keys returned to front desk

Deposits left for more than 6 months after the event will be forfeitable

If during your event the trash needs to be taken out the dumpsters are located on the west side of the building.

Cleaning Supplies are located under the sink of each room

Authorized by Cottonwood Recreation Center Representative:

Representative Signature _____

Date Signed _____ Percentage of Deposit to be returned _____ Amount returned _____

