

**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 \_\_\_\_\_

## Facility Rental Application – CRC Party Rooms

1. I, \_\_\_\_\_, request permission to use the following facility  
 (check all that apply):

	Up to 8 Patrons	9 – 16 Patrons	17 – 24 Patrons	25 – 32 Patrons
<b>Rental Plus</b> Includes a day pass for each attendee	\$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"/>
<b>PARTY ROOM Requested</b> (based on availability)	Party Room A <input type="radio"/>	Party Room B <input type="radio"/>	Party Room All <input type="radio"/> (Additional charges may apply)	Monday-Friday Call for availability Saturday 12p-2p 3p-5p Sunday 2p-4p <b>Please circle one</b>

Current open swim hours for youth is Monday – Friday 7 am – 11 am and 1 pm – 8 pm; Saturday 8 am – 10 am and 12 pm – 5 pm; Sunday 1 pm – 4 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? \_\_\_\_\_

6. Equipment or services requested (Contingent upon availability. Please check all that apply):

# of chairs \_\_\_\_\_ # of tables \_\_\_\_\_

7. Will there be decorations? \_\_\_\_\_ If yes, explain: \_\_\_\_\_  
**Anything hanging from the walls must be hung with blue painter's tape.**

8. Will there be amplified sound? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

9. Will there be food at the event? \_\_\_\_\_ If yes, explain: \_\_\_\_\_  
 (Certificate of Insurance with endorsement may apply)

**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. All payments must be made no later than 10 days prior to use.

**Initial \_\_\_\_\_** I understand that the City may allow usage in the room(s) directly adjacent to the room(s) listed on the permit. The City will make reasonable attempts to keep bleed over noise to a minimum but the walls between each room are sound barriers not sound proof.

**Initial \_\_\_\_\_** I have received, read and understand the information contained in this document. No confetti or confetti like products are allowed in the rooms. Additional required cleaning will be deducted from your deposit on file.

**Initial \_\_\_\_\_** I understand that my reservation includes set-up and clean-up times of ½ hour prior to and ½ hour post my event. Party Room(s) must be cleaned and cleared by your appointed time to avoid any conflicts with the next reservation.

**Initial \_\_\_\_\_** If a cancellation occurs, the renter will be subject to deposits being withheld from the original rental price as listed below:

Cancellations made 30 days in advance or more:	0%
Cancellations made 30 days or less:	10%
Cancellations made 14 days or less:	30%

A charge of 10% of the total reservation fee will be applied to all rescheduled reservations

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
_____	_____	_____
Driver's License #	Date of Birth	E-mail
_____	_____	_____
Name of Alternate Contact Person for Event	_____	Phone
_____	_____	_____
City Staff Signature	City Staff Printed Name	Date

Cottonwood Recreation Center currently accepts payment in the form of cash, DiscoverCard, Visa, Master Card, and local checks made out to the City of Cottonwood. No out-of-state personal checks will be accepted. This form is subject to change without notice.

Copy to RC \_\_\_\_\_

Copy to Aquatics \_\_\_\_\_

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: Rental Plus

#of people attending: \_\_\_\_\_

# of chairs needed: \_\_\_ # of tables needed: \_\_\_

Cleaning Supplies are located under the sink of each room





