

Checked Lomita Residency _____
Staff Member _____

Date Received _____
Time Received _____

CITY OF LOMITA
DEPARTMENT OF PARKS & RECREATION

24428 Eshelman Avenue, Lomita, CA 90717
Phone: 310-326-0140 Fax: 310-326-0690

Permit Number:

Application for Facility Reservation and Use Agreement

() Gymnasium () Softball Field () Belba Field

() East Picnic Shelter () Central Picnic Shelter () West Picnic Shelter

APPLICANT (Name of primary contact): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE :(Day) _____ (Evening) _____

EMAIL ADDRESS: _____

GROUP OR ORGANIZATION: _____

DATE AND TIME REQUESTED (Include Set-up and Clean up):

Date(s): _____ Start Time(s): _____ End Time(s): _____

EVENT INFORMATION

PROPOSED USE OR FUNCTION TYPE: _____

ESTIMATED ATTENDANCE: _____

PLEASE LIST ALL EQUIPMENT OR OBJECTS TO BE USED:

- All fees and/or deposits are payable 10 working days prior to use
- **Payment Options: DEBIT or CREDIT CARD ONLY**
- **ALCOHOL & SMOKING is STRICTLY PROHIBITED at all park facilities**
- This application becomes your permit for facility use upon authorized approval and payment of all fees and/or deposits
- Vehicles may not enter the park to drop off or pick up any equipment (BBQs, tables & chairs, tents, etc.).
- Park Restrooms will close at 5:00pm (Oct-Feb) and 6:00pm (Mar-Sept)
- **At any time the City has the right to CANCEL this application, if the room's use is required for any City related event or program**

AGREEMENT FOR USE

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 Lomita and/or Parks and Recreation Department. The applicant further agrees that in consideration of being permitted to use said facilities, he, she or it will save or hold the City of Lomita and/or their employees free and harmless from any loss, claims, and liability or damages and/or injuries to persons or 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. My signature certifies that all information on this application is true, including the prohibition of alcohol. I understand that any misstatements or omissions of material fact herein may cause forfeiture of my deposits. Refundable deposits are refundable if there was no damage, all policies were followed, and the facility was left in good order. I hereby certify that I have read (or had interpreted), understand, and agree to abide by the attached reservation policies of the Parks and Recreation Department.

Applicant's Signature: _____ Date: _____

Office Use Only

Approved: () Denied () Date: _____

Director of Parks and Recreation: _____

Rental Fee: _____

Rental Deposit: _____

Supervision Charge: _____

Light Fee: _____

TOTAL: _____

Fees Paid: _____ Date: _____

Deposits Paid: _____ Date: _____

Deposits Refunded: _____ Date: _____

ALL FEES DUE BY: _____