



# FACILITY RESERVATION APPLICATION

City of Yucaipa Community Services Department

## Step One - Information

Applicant Name (please print clearly) \_\_\_\_\_ Phone Number \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Organization Name (if applicable) \_\_\_\_\_ Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Is applicant a City of Yucaipa resident? (Proof of residency required)  Yes  No

Applicant email: \_\_\_\_\_

Alternate contact person: \_\_\_\_\_  
Name \_\_\_\_\_ Phone Number \_\_\_\_\_

## Step Two - Event

Event Name: \_\_\_\_\_

Type of Event:  Meeting  Birthday  Family Gathering  Reception/Banquet  Shower-baby or  Bridal

Wedding - Names of Couple: \_\_\_\_\_  Other: \_\_\_\_\_

# of Attendees: \_\_\_\_\_ Date(s) of Use: \_\_\_\_\_ Day:  M  Tu  W  Th  F  Sa  Su

Set-up Time: \_\_\_\_\_ to \_\_\_\_\_ Guest Arrival: \_\_\_\_\_ Clean-up Time: \_\_\_\_\_ to \_\_\_\_\_

\*Hours requested include the time it takes to set-up and clean-up the event. Total Number of Hours: \_\_\_\_\_

Step Three - Details	
<u>Is applicant a non-profit?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, non-profit # _____	<u>Will alcoholic beverages be served?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If <b>yes</b>, security is required for the event and an additional deposit fee will be charged.</i>
<u>Is the event a fundraiser?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Will food be served?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Is the event open to the public?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Will you have any of the following?</u> <input type="checkbox"/> DJ <input type="checkbox"/> Band <input type="checkbox"/> Caterer: _____
<u>Is there an admission fee for the event?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Any set up the day(s) prior to the event?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No *Fees Apply
<u>Will any items be sold?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Insurance (please check one):</u> <input type="checkbox"/> Will provide insurance <input type="checkbox"/> Will purchase insurance through the City of Yucaipa
<u>Will alcoholic beverages be sold?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If <b>yes</b>, ABC license will be required. Please ask staff for letter to submit to ABC Board of California. License must be received by staff no later than 1 week prior to event date.</i>	

**Step Four - Facility**

Community Center -34900 Oak Glen Rd:

- Banquet Room  Meeting Room  Kitchen  Dance Room  Activity Room  Gymnasium

Scherer Center - 12202 1<sup>st</sup> St:

- Banquet Room:  Room A  Room B  Room C  Kitchen  Arts & Crafts Room  Computer Lab

Yucaipa Performing Arts Center – 12062 California St:

- Mountain View Room:  Room A  Room B  
 Theater Rental:  Banquet Setup  Theater Setup  
 Kitchen  Front Lobby  Blackbox  
 Dressing Rooms:  I  II  III  IV  Green Room  
 Outdoor Stage  Outdoor Stage with Park

Will you require the use of City-owned equipment?

- Yes  No

If yes, please check items:

- Microphone  Projector  Sound System  Stage (YPAC only)

**Step Five - Signature, Please Read Carefully Before Signing**

Applicant(s) hereby agrees to indemnify, defend and hold harmless City of Yucaipa, its officers, officials, employees and volunteers from and against all claims, damages, losses and expenses that may arise during or be caused in any way by such occupancy or use of facilities, but the facility user shall not be liable for any claims, damages, losses and expenses caused by the sole negligence or willful misconduct of the City of Yucaipa. Applicant(s) shall have received any and all permission or license(s) as may be required to perform or use any protected materials in its use of the Premises. Applicant(s) agrees to protect and hold harmless the City, its elected officials, employees and agents from and against any and all claims, penalties, and/or damages which may accrue as a result of Applicant's failure to comply with this requirement. I have read and agree to abide by all of the City of Yucaipa policies stated above and in the Facility Rental Policies.

Applicant Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Print Applicant Name: \_\_\_\_\_