

MENDOCINO COAST RECREATION AND PARK DISTRICT

Request for use of the Fort Bragg Recreation Center

Person Applying _____ Organization _____

Address _____

Home Phone _____ Work Phone _____

The users of Recreation District facilities shall adhere to adopted regulations, be responsible for the condition and care of equipment and facilities, leave all facilities clean and orderly and have responsible adults present at the assemblies of minors. Applicant/User agrees to be solely responsible for any and all liability, claims, loss, demands, damages, costs and expenses, including attorneys' fees, arising out of or resulting from any injury to persons or damage to property which arise out of its use of District's facilities. Applicant/User agrees to defend, indemnify, and hold harmless the District, its officers, agents, employees, and volunteers against any and all such claims, demands, causes of action, suits, and expenses, whether or not any such claims or action is alleged to have been caused in part by District as a party indemnified hereunder.

Facility Requested (circle one) Pool, Gym (skate), Gym (regular), Activity Room

Date of Use ____/____/____ **Hours of Use** from ____ o'clock to ____ o'clock

Special Instructions _____ **# of Users** _____

Fort Bragg Recreation Center Facility Rental Procedures & Policy

1. Facility rental requests will be taken on a first come, first served basis.
2. No phone or fax requests will be taken; rental must be made in person.
3. Payment must be made at the time the rental request form is submitted.
4. Rental includes set up and clean up time; parties must be completed within the time specified. A fee will be charged for any parties lasting longer than time scheduled through District Office.
5. Cancellations must be made by noon the Wednesday before the party at which time a ten-dollar cancellation fee will be charged. Any persons making cancellations past noon the Wednesday before their party will not receive a refund of any kind.

I have read and agree to abide by Fort Bragg Recreation Center Procedures & Policy.

Signature of Applicant _____ **Date** _____

FOR OFFICE USE ONLY:

This request is approved/disapproved _____
District Administrator Center Coordinator

Hours _____ Fee Per Hour _____ Fee _____ In Book _____ Receipt # _____