# Pleasant Hill Recreation & Park District
# Facility Rental Application

## Private/Individual/Organization/Company Event Information

Name of Responsible Party: _____

Company/Organization Name: _____

Address: _____ City: _____ Zip: _____

Day Phone: _____ Work Phone: _____ Fax Number: _____

Cell Phone: _____ Email Address: _____

Designated Alternate Contact Name: _____ Phone Number: _____

## Event

**CHECK FACILITY REQUESTED : (MAXIMUM CAPACITY)**

| **Community Center** | **Senior Center** | | **Teen Center** | **Winslow Center** |
|---|---|---|---|---|
| Perera Pavilion (380) | Chateau Hall (255 ) | Classroom (50) | Lounge ( 80) | ☐ Rooms 1 & 2 (40) |
| McHale Room (80) | Dining Room (88) | Commercial Kitchen | Meeting Room (30) | Assembly Room(120) |

**RENTAL CLASSIFICATION (Please check only one):**

☐ Resident ☐ Non-resident / Commercial ☐ Non-profit

Requested Date(s): _____
DAY(S) OF THE WEEK MONTH DAY YEAR

Alternate or Additional Date(s) (Circle One): _____
DAY(S) MONTH DAY YEAR

**Type of Event: (circle one)** Meeting Seminar/Workshop Party Wedding/Reception Fundraiser/Benefit Other

SET-UP TIME: _____ a.m./p.m. to _____a.m./p.m. **Number in Attendance:** _____
EVENT TIME: _____ a.m./p.m. to _____a.m./p.m.
CLEAN-UP TIME: _____ a.m./p.m. to _____a.m./p.m. **Total Hours:** _____

***Note: Rental Hours must include all time needed for decorating/set-up, "main event" and clean-up.***

***Fees will not be refunded for time not used. Reserved time should be chosen carefully. Changes may be subject to additional charges.***

How many rectangular tables required? _____ How many round tables required? _____ How many chairs required? _____

Will alcohol be served? Yes ☐ No ☐ Will alcohol be sold? Yes ☐ No ☐ ***If yes, you must obtain an A.B.C. Permit.***

Will food be served? Yes ☐ No ☐ If yes, To be given away ☐ To be sold ☐ Catered ☐ Cooking On-Site ☐

Is there admission to attend event? Yes ☐ No ☐

Will you have Vendors and/or Booths at the event? Yes ☐ No ☐

Will there be Music? Yes ☐ No ☐ If yes, Live Band ☐ DJ ☐ Recorded ☐

Will you bring in any additional equipment and/or decorations? Yes ☐ No ☐ If so, please describe and include person( s) delivering and when. _____

_____