

Recreation & Senior Services Department

100 Civic Center Dr Newport Beach, CA. 92658-8915 Phone: (949) 644-3151 — FAX: (949) 644-3155

MARIAN BERGESON AQUATIC CENTER FACILITY USE/RENTAL APPLICATION

The City Coun	cil, Parks,	Beaches	& Re	creation	Commis	ssion a	and	Recreati	on &	Senior	Services
Department issu						•					•
necessary addition						_				_	
deposits before											
CONSTITUTE A	PPROVAL.	YOUR	COPY	WILL E	BE RETI	JRNED	TO	YOU A	AFTER	APPRO	OVAL OR
DENIAL. Reserv	ations requi	re at least	five (5)	working	days to p	process	. Ful	I paymei	nt of re	ental fees	s is due a
least fourteen (14) regular Cit	y business	s days p	rior to ev	ent date.	Applica	ants r	nust be a	at leas	t 25 year	s of age.
Title of Event									Da	ate Subr	mitted
Organization								Cor	ntact F	Represen	tative
Mailing Address					City			Z	Zip		
Phone	/			Fax		E	mail				

Date Requested (list each date – use separate page if more space needed)	w/ Setup and	Event Start Time	Event End Time	Estimated Participants	Estimated Spectators	Amplified Sound?*

•	Check box if facility will be used to raise money/funds*: If Yes, what will the proceeds be used for?
•	Check box if there will be food concessions*: If Yes, list concessionaire:
•	Check box if vendors will be present*: If Yes, list vendor(s):

 Certificate of Liability Insurance with a minimum of \$1,000,000 is required with application listing the City of Newport Beach and Newport Mesa Unified School District as additional insured and provide a Letter of Endorsement with said coverage. Event insured by:

*The use of amplified sound, fundraising, concessions or special parking arrangements requires a CITY SPECIAL EVENTS PERMIT.

By submitting this form, I, the applicant, on behalf of the above-named organization, do hereby agree to defend, indemnify and hold harmless the City of Newport Beach and the Newport Mesa Unified School District, and their boards and commissions, officers, agents or employees from any and all claims, losses, injury, death, damages, liabilities, actions, costs and expenses whatsoever resulting from or in any way arising out of the use of facility or equipment. Said organization accepts all responsibility for any damage to premises, furniture, equipment or grounds resulting from use of facility. On behalf of the above-named organization, I do hereby agree to follow, abide by and enforce the Rules & Regulations, Participant Code of Conduct, and Policies governing the facility as set forth by the City Council, the Parks, Beaches & Recreation Commission, and the Recreation & Senior Services Department. In the event of facility rental cancellation, a full refund of security deposit will be given. All cancellation requests must be submitted in writing. The following cancellation charges will be assessed:

Number of regular City business days' notice	Cancellation charge
30 or more	0
14 to 29	\$250
4 to 13	50%
3 or fewer	100%

I, the applicant, have read the above statements and the applicable Rules & Regulations, Code of Conduct and City policies and understand them fully. I represent that I am authorized by the above-named organization to enter into this agreement.

Applicant Signature				
Approved By				
For Office Use Only				
Total rental fees \$	Deposit: Date:	Cash:	Check:	
CC #	CVV:_		Exp date:	
Equipment fees deposit \$	Date:	Cash:	Check:	
Insurance/Endorsements submitted:		_ SEP?		
Notify Eastbluff HOA:		_ Notify Police:		
Comments:				