CITY OF REDLANDS – ONE STOP PERMIT CENTER APPLICATION/PERMIT TO USE PARK OR PARK FACILITIES REDLANDS BOWL RESERVATION/REQUEST

35 Cajon Street, Suite 15 A, P.O. Box 3005, Redlands CA 92373 (909) 798-7551 Fax (909) 798-7670 (Reservations taken year-round. No reservations made without fees/deposit paid and completion of form.)

| Date/Time of Activity | rity Date/Time of Rehearsals | | | |
|--|---|---|---|---|
| Name of Organization/In | dividual | | | |
| Address | | City | State | Zip |
| | |) | (C) | |
| Nature of activity (descr | ibe in detail): | | | |
| Estimated Attendance _ | Is this activi | ty open to the public? | Will ac | lmission be charged? |
| ☐ GR | ROUP 1 | GR | OUP 2 | GROUP 3 |
| Reservation/Permit Fee S | \$ | Use | Fee \$ | |
| Clean-up Deposit - \$300 | Plus \$50 Per Hour \$ | | | |
| Stage Only (R | ehearsals) No. of Ho | ours Ho | ırly Fee \$ | Total \$ |
| Bowl Rental | No. of He | | urly Fee \$ | |
| Prosellis Rent | | | | Total \$ |
| Park Attendar | | | urly Fee \$ | |
| Mission Gables | | | urly Fee \$ | |
| | | | L PAID \$ | |
| * Park Attendant is man | ndatory. ** Piano Re | ental available. Conta | | |
| Applicant shall comply with all C | used am/pr | n to am/pm Redlands Bowl. Applicant sh | (Section 12.44.080 | nd hold harmless the City and the Redlands y and all claims, lawsuits, damages, losses, |
| agents' and invitees', negligent or NOTE: This permit is subject to it Redlands Municipal Code have bee Applicant shall provide the City a damages on account of bodily injuinsureds, the City and RCMA, and (\$1,000,000.00) per occurrence property damage coverage, togethe maintained for the duration of app PROOF OF INSURANCE REQUINSURANCE Company | intentionally wrongful acts or ommediate cancellation by any en violated. Ind RCMA, for review and appry and property damage arising at their respective elected officiand two million dollars (\$2,00 per with such other and additional licant's activity. IRED: Policy No. | missions in conducting applica Police Officer or agent of the roval, certificates of insurance from applicant's activity. Suc als, officers, employees and ag 10,000) in the aggregate of c nal coverage as the City's Risk | nt's activity allowed by to City of Redlands who do for public liability insura h insurance shall name of ents. Such insurance s comprehensive general li Manager may determine | |
| CANCEL | LATION OF EVENT IS | SUBJECT TO A TEN | PERCENT ADMIN | IISTRATIVE FEE. |
| Signature of Applicant | | | | Date |
| Signature of RCMA | | | | DateDate |
| Distribution: Office | | Police Department | | Applicant REVISED 12/07/07 |