

**CITY OF REDLANDS – QUALITY OF LIFE DEPARTMENT
FORMAL PARK RESERVATION REQUEST**

**35 Cajon Street, Suite 222, P.O. Box 3005, Redlands CA 92373 (909) 798-7655 FAX (909) 335-6098
(Reservations taken year-round. No reservations made without fees/deposit paid and completion of form.)**

Date/Time of Activity _____ Date/Time of Set-up _____ Estimated Attendance _____
Requested Park: Brookside Community Crafton Brookside Ed Hales Ford
Jennie Davis Prospect Smiley Sylvan Texonia Other _____

Name of Organization/Individual _____

Address _____ City _____ State _____ Zip _____

Phone (W/H) _____ (C) _____ (Email) _____

Nature of activity (describe in detail): _____

City Department Redlands Citizen Non-Citizen

Type of Equipment Set-up by Event Coordinator(s)

__Tables Chairs EZ Ups Decorations Flowers __Food __Stereo __Porta Potty __Temporary Trash Bins __Electricity
__Other _____

Type of Vendor/Service

__Jumper __Caterer __Clown __Face painter __Police __Fire __Other _____

Per Municipal Code 12.44.050 Outside sales are not allowed without express permission by the Quality of Life Director.

Per Municipal Code 12.44.190 No person shall cook or prepare on areas except for those specifically designated.

Per Municipal Code 5.04.090 All vendors are required to have a current business license with the City of Redlands.

Sylvan Park Picnic Areas

_____ **Section "A"** (select tables desired) _____ **Gazebo** Times: _____ am/pm to _____ am/pm Total Hours ____
1 2 3 4 5 6 7 8 9
10 11 12 13 14 15 16 17

_____ **Section "C"** (select tables desired) _____ **Covered Picnic Area** Times: _ am/pm to _____ am/pm Total Hours ____
1 2 3 4 5 6 7

Application for Amplified Sound/Other Equipment

Type of amplification/other equipment _____

Nature of Use _____ Time of day to be used _____ am/pm to _____
Chapter 12, Redlands Municipal Code

Applicant shall comply with all City laws governing use of Redlands parks. Applicant shall defend, indemnify and hold harmless the City and its respective officials, officers and employees from and against any and all claims, lawsuits, damages, losses, injuries, costs and liabilities for injury (including death) to persons or property arising from or associated with applicant's and applicant's officers', employees', agents' and invitees', negligent or intentionally wrongful acts or omissions in conducting applicant's activity allowed by the approved reservation request (Permit). **Applicant Initial** _____

NOTE: This permit is subject to immediate cancellation by any Police Officer or agent of the City who determines that any provision(s) of the City's Municipal Code have been violated.

Applicant may be required to provide the City, for review and approval, certificates of insurance for public liability insurance to protect against loss from liability for damages on account of bodily injury and property damage arising from applicant's activity. Such insurance shall name on the policy or endorsement, as additional insureds, the City of Redlands and its respective elected officials, officers, employees and agents. Such insurance shall include not less than One Million Dollars (\$1,000,000) per occurrence and Two Million Dollars (\$2,000,000) in the aggregate of comprehensive general liability insurance, including bodily injury and property damage coverage, together with such other additional coverage as the City's Risk Manager may determine to be prudent. Insurance coverage shall be maintained for the duration of applicant's activity. Proof of Insurance Policy No. _____ Insurance Company _____

Signature of Applicant _____ Date _____

OFFICE USE ONLY

_____ Approved _____ Not Approved Authorized Signature _____ Date _____

Requirements: _____
