

**CITY OF REDLANDS – ONE STOP PERMIT CENTER
APPLICATION/PERMIT TO USE PARK OR PARK FACILITIES
AVICE MEEKER SEWALL THEATER RESERVATION/REQUEST**

35 Cajon Street, Suite 15A, P.O. Box 3005, Redlands CA 92373 (909) 798-7655 Fax (909) 798-7670
(Reservations taken year-round. No reservations made without fees/deposit paid and completion of form.)

Date/Time of Activity / _____ Date/Time of Rehearsals _____

Name of Organization/Individual _____

Address _____

City _____ State _____ Zip _____

Phone (W) _____ (H) _____ (C) _____

Nature of activity (describe in detail): _____

Estimated Attendance _____ Is this activity open to the public? _____ Will admission be charged? _____

GROUP 1

GROUP 2

GROUP 3

Reservation/Permit Fee \$ _____ Use Fee \$ _____

Clean-up Deposit - \$300 Plus \$50 Per Hour \$ _____

_____ Apron Rental (Rehearsals) No. of Hours _____ Hourly Fee \$ _____ Total \$ _____

_____ Open Stage No. of Hours _____ Hourly Fee \$ _____ Total \$ _____

_____ Park Attendant* No. of Hours _____ Hourly Fee \$ _____ Total \$ _____

TOTAL PAID \$ _____ DATE _____

* Park Attendant is mandatory.

APPLICATION/PERMIT FOR AMPLIFIED SOUND

Type of amplification equipment _____

Nature of use _____

Time of day amplifier is to be used _____ am/pm to _____ am/pm (Section 12.44.080-12.44.130; Redlands Municipal Code)

Applicant hereby acknowledges that he/she has read, understands, and will comply with all rules pertaining to use of Park and Recreation facilities. Applicant hereby assumes all responsibility to leave areas in a neat and clean condition. Applicant agrees to hold harmless and indemnify the City of Redlands, California, from any and all liability, except for that liability arising as a result of the sole negligence of the City, for the injury to persons or property occurring as a result of this activity and agrees to be liable to said City for any and all damages to any park, facility, and buildings owned or controlled by the City, which results from the activity of permittee or is caused by any participant in said activity. Applicant Initial _____

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

PROOF OF INSURANCE REQUIRED: Policy No. _____

Insurance Company _____

CANCELLATION OF EVENT IS SUBJECT TO A TEN PERCENT ADMINISTRATIVE FEE.

Signature of Applicant _____ Date _____

_____ Approved _____ Disapproved Authorized Signature _____ Date _____

Distribution: _____ Office _____ Parks Division _____ Police Department _____ RCMA _____ Applicant _____ REVISED 12/07/07