



City of Watsonville  
Parks and Community Services Department  
231 Union St., Watsonville, CA 95076  
(831) 768-3240  
[www.watsonvillerec.com](http://www.watsonvillerec.com)

## FIELD/COURTS FACILITY RENTAL APPLICATION

- |   |  |
|---|--|
| <input type="checkbox"/> Ann Soldo Soccer Field             | <input type="checkbox"/> E.A. Hall Synthetic Field           |
| <input type="checkbox"/> Ramsay Park Softball Field         | <input type="checkbox"/> Seaview Park Field Area             |
| <input type="checkbox"/> Ramsay Park Sotomayor Soccer Field | <input type="checkbox"/> Emmett Courts Park (Handball Court) |
| <input type="checkbox"/> Pinto Lake Park                    | <input type="checkbox"/> Tennis Court(s) at: _____           |
| <input type="checkbox"/> Pinto Lake Park Baseball Field     | <input type="checkbox"/> Other: _____                        |

### Proposed Dates and Times of Use:

Rental Date(s): \_\_\_\_\_  
*Multiple rental dates require separate contracts for each date requested.*

Set-up Time: Date \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_\_ m to \_\_\_\_\_ m  
Event Time: Date \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_\_ m to \_\_\_\_\_ m  
Clean up: Date \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_\_ m to \_\_\_\_\_ m

Rental Purpose: \_\_\_\_\_

Check all that apply:

____ Practice/Scrimmage	Number of Teams ____
____ Games	Number of Games ____
____ Tournament	Number of Teams ____

Estimated Number of Participants: Adults \_\_\_\_ Youth \_\_\_\_ Total Estimated Number of Participants \_\_\_\_

Estimated Number of Spectators: \_\_\_\_\_

Total Estimated Number of Participants and Spectators \_\_\_\_

### Applicant Information:

Today's Date: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Name of Individual: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home #: \_\_\_\_\_ Business #: \_\_\_\_\_ Message #: \_\_\_\_\_

Email: \_\_\_\_\_

Is the applicant a 501(c)(3) organization? Yes \_\_\_\_ No \_\_\_\_

If yes, please provide the EIN \_\_\_\_\_

Is the applicant a governmental agency (City, County, State or Federal)? Yes \_\_\_\_ No \_\_\_\_

Is the applicant a business/promoter? Yes \_\_\_\_ No \_\_\_\_

If yes, provide City of Watsonville Business License #: \_\_\_\_\_

**Rental Information:**

Is the event open to the public? Yes \_\_\_\_ No \_\_\_\_  
Is this event a fundraiser? Yes \_\_\_\_ No \_\_\_\_  
Will admission, dues, fees, donation or charges be collected? Yes \_\_\_\_ No \_\_\_\_  
If yes, purpose of the fee: \_\_\_\_\_ Price of admission: \$ \_\_\_\_\_  
Will items be sold? Yes \_\_\_\_ No \_\_\_\_  
If yes, what type? \_\_\_\_\_ Business License # \_\_\_\_\_  
Will decorations be used? Yes \_\_\_\_ No \_\_\_\_  
If yes, what type \_\_\_\_\_  
Will food be served? Yes \_\_\_\_ No \_\_\_\_  
Will there be entertainment? Yes \_\_\_\_ No \_\_\_\_  
If yes, what type? \_\_\_\_\_  
Will there be music? Yes \_\_\_\_ No \_\_\_\_  
If yes, amplified? Yes \_\_\_\_ No \_\_\_\_

**Portable Restroom Requirements:**

The applicant will be required to provide portable restrooms according to the chart below:

Total Estimated Number of Participants and Spectators From Above	Event Will Be Up To 4 Hours Long	Event Will Be More Than 4 Hours Long
1 to 100	0	1
101 to 200	2	3
201 to 300	3	4
301 to 400	4	5
More the 400	To Be Determined	To Be Determined

In addition to providing the required number of restrooms, the applicant must also provide one wash station. The applicant is responsible for making all arrangements and for paying the portable restroom vendor directly. The rental contract will not be finalized until the applicant has provided written proof that the required number of restrooms have been ordered. For multiple consecutive day rentals, the applicant must make arrangements with the vendor to have the restrooms serviced prior to the start of each rental day. The applicant must also arrange do have the restrooms serviced as necessary during the event.

It is understood and agreed that the applicant assumes all risks for loss, damage, liability, injury, cost, or expense that may arise during or be caused in any way by such user or occupancy of the facilities of the City of Watsonville; the applicant further agrees that in consideration of being permitted to use said facilities the applicant and their guests/attendees will hold harmless from any loss, claim and liability or damages, and/or injuries to persons or property that in any way may be caused by applicant's and their guests/attendees use or occupancy of said facilities.

I, the undersigned, hereby certify that I will be personally responsible for any damage sustained on the grounds, building, furniture, or equipment occurring through the occupancy of said facilities by the Applicant or their guests/attendees.

I, the undersigned, have read, and agree to abide by the rules and regulations for the facility use as listed on supplementary materials.

**No smoking, no alcohol drinking and no drug use are allowed at any City parks or facilities.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICIAL USE ONLY:**

Date Application was received: \_\_\_\_\_

The application is complete: Yes \_\_\_\_ No \_\_\_\_

The date requested is available: Yes \_\_\_\_ No \_\_\_\_

Deposit was paid in full: Yes \_\_\_\_ No \_\_\_\_

Rental request was placed on the facility calendar: Yes \_\_\_\_ No \_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Staff Signature