



Watsonville
CALIFORNIA

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

FIELD/COURTS FACILITY RENTAL APPLICATION

- Ann Soldo Soccer Field
- E.A. Hall Synthetic Field
- Ramsay Park Softball Field
- Seaview Park Field Area
- Ramsay Park Sotomayor Soccer Field
- Emmett Courts Park (Handball Court)
- Pinto Lake Park
- Tennis Court(s) at: _____
- Pinto Lake Park Baseball Field
- 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 to 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