

**City of Lemoore  
Depot Arbor  
Facility Reservation/Use Form**

**SECTION I - GENERAL INFORMATION**

**A. For Individual Use**

1. Name \_\_\_\_\_ Phone No. \_\_\_\_\_
2. Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_
3. Resident of Lemoore: Yes \_\_\_\_\_ No \_\_\_\_\_

**B. For Organization or Group Use**

1. Name of Organization or Group \_\_\_\_\_
2. Organization/Group Address \_\_\_\_\_
3. Name of Responsible person \_\_\_\_\_  
Address \_\_\_\_\_ Phone No. \_\_\_\_\_  
Other Contact Names/Phone \_\_\_\_\_
4. Is this a non-profit organization/group? \_\_\_\_\_ Yes \_\_\_\_\_ No
5. Is the Group/Organization composed of members who reside within Lemoore? \_\_\_\_ Yes \_\_\_\_ No

**SECTION II - DATE OF USE INFORMATION**

**NO REFUNDS**

*Requested Day, Date and Time (s) of use:*

<u>Day of Week</u>	<u>Date</u>	<u>Time</u>
_____	_____	_____ m to _____ m
_____	_____	_____ m to _____ m

**Type of Function Please describe in full:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Estimated Attendance: \_\_\_\_\_ Alcohol Served \_\_\_\_\_ Alcohol Sold \_\_\_\_\_

**Additional Items Required:** PortaPotties: \_\_\_\_\_ Fencing: \_\_\_\_\_ ABC Permit: \_\_\_\_\_ Insurance \_\_\_\_\_

Other \_\_\_\_\_

Security \_\_\_\_\_ # \_\_\_\_\_ Time \_\_\_\_\_

**Insurance Co. & Phone #** \_\_\_\_\_

I, the undersigned, hereby agree to hold the City of Lemoore Free and Harmless from any liability in connection with the use of this facility.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Title: \_\_\_\_\_

**For Office Use Only**

Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_ Receipt # \_\_\_\_\_ Deposit \$ \_\_\_\_\_

Receipt # \_\_\_\_\_ Arbor \$ \_\_\_\_\_ Application: \_\_\_\_\_ Approved \_\_\_\_\_ Denied

Reason for Denial: \_\_\_\_\_

Parks and Recreation Director: \_\_\_\_\_ Date: \_\_\_\_\_

*Please initial department approval and check receipt of documents*

\_\_\_\_\_ Parks & Rec Apprvd \_\_\_\_\_ PD Apprvd \_\_\_\_\_ City Mgr Apprvd \_\_\_\_\_ Permits Rcvd \_\_\_\_\_ Security

(FOR OFFICE USE ONLY)

Depot Arbor Reservation Fee \$75.00 per day x \_\_\_\_\_ days = \$ \_\_\_\_\_

Reservation / Cleanup Deposit = \$100.00 \_\_\_\_\_

Other \_\_\_\_\_ Fees \$ \_\_\_\_\_

Total Due \$ \_\_\_\_\_

**Payments:**

Amount \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ Date \_\_\_\_\_

Amount \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ Date \_\_\_\_\_

Amount \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ Date \_\_\_\_\_

**LAYOUT:**

