



CITY OF SAN DIEGO PARK AND RECREATION DEPARTMENT

Date Received _____
Method of Payment _____
Cash _____ Check # _____
Official City Receipt No. _____
(Attach a copy) _____
Proof of Insurance _____
(Attach certificate of insurance)

**APPLICATION AND PERMIT FOR PARK USE
PARK AND RECREATION DEPARTMENT**

Check any that apply: Facility Field Ground Use (Picnic, BBQ, Open Space/Trail Event, etc.)
 Picnic Shelter Special Equipment Youth Camp (Fiesta Island)
 Wedding Sites (Balboa/Mission Bay Park/Shoreline) Adult Fitness Other

Event Type _____ Park Name _____ Facility _____
Date(s) Desired _____ Time of use from _____ to _____ total hrs. _____
Set-up Date _____ Set-up time from _____ to _____ total hrs. _____
Clean-up Date _____ Clean-up time from _____ to _____ total hrs. _____

Name of Person/Host Organization/Company _____ Telephone () _____
On Site Contact Person _____ Cellular () _____
Address _____ Zip Code _____
Email address: _____ Estimated Attendance _____ **Estimated Attendance at any given time** _____

Is the Host Organization (company) a bona fide tax exempt nonprofit entity? Yes No

If yes, a copy of the 501 tax exemption letter is required and must be attached to the application.

Catered/Organizer - Yes No Caterer _____

Note for caterers: Written authorization submitted on the Company letterhead stationery is required, which authorizes event organizer to apply for Park Use Permit on their behalf.

Are admission, participant fees, registration fees or any other fees required? Yes No

*Fundraiser/Commercial/Promotional Activity Yes No

INDOOR FACILITIES: # of Tables Requested _____ # of Chairs Requested _____ **PA _____

**Set-Up: Please provide diagram at least 30 days in advance of event. **Balboa Park facilities only.

Please note: The Park and Recreation Department does not furnish Audio/Visual equipment (projectors, screens, televisions, VCR, extension cords, specialized microphones or easels)

ADDITIONAL SERVICES REQUESTED: Lights Kitchen

ALCOHOL (additional requirements where allowed): Yes No

Alcoholic beverages are not permitted in parks and beaches where there is a prohibition via SDMC 56.54 without a Special Event Permit as issued by the Office of Special Events. The granting of such permit may require CEQA review. Glass containers of any kind are prohibited on all the beaches and park areas (SDMC 56.54).

PARK AREA:

Air Jump (Co. Name) _____ Carnival/Animal Rides (where permitted) Tables _____ Chairs _____

Canopy - up to 10' x 10' _____ Canopy - up to 10' x 20' _____ Canopy - up to 20' x 20' _____

Any shade structure w/ two or more sides, larger than 20' x 20' requires a fire permit.

Dumpster _____ Portable Restrooms _____ Vendors _____ Generator _____

Other _____

MUSIC/VOICE AMPLIFICATION: All amplification is subject to park supervisor approval, restrictions may apply.

Yes No If yes, indicate type: _____

Purpose: _____ Intended Hours of Use: _____

FEES (indicate type):

_____	\$ _____ x Number of Hours _____ = Subtotal	\$ _____
_____	\$ _____ x Number of Teams _____ = Subtotal	\$ _____
_____	\$ _____ x Number of Fields _____ = Subtotal	\$ _____
_____	\$ _____ x Number of _____ = Subtotal	\$ _____
_____	\$ _____ x Number of _____ = Subtotal	\$ _____

PERMIT FEE TOTAL \$ _____

*Recreation Council Fee _____ x Number of hours _____ = Subtotal \$ _____

SECURITY/DAMAGE/CLEANING/STORM DRAIN DEPOSIT \$ _____

RESIDENCY/GROUP STATUS: Resident*** Nonresident Youth Adult Senior and/or Disabled Person***

Application must be completed and received by this office **at least 30 Business Days** in advance for a Park Use Permit. **This application/permit may be cancelled by Park & Recreation staff if all requirements are not met a minimum of 30 days before your event.** Please notify this office in writing if your event is CANCELLED.

I have read and understand all the rules and regulations governing the use of City park land and/or facilities that are attached to and a part of this application and agree to abide by same. By (print name) _____, who hereby certifies that he/she is the duly qualified and authorized representative of PERMITTEE as set forth in this Application and Permit.

Authorized Signature _____ Date ____/____/____

Park & Recreation Department Representative _____ Date ____/____/____

*** 75% of members of Team must be City of San Diego residents, military personnel stationed in San Diego, or the sponsoring company is within the City Limits.

**DURING THE RENTAL, IF PARK AND RECREATION DEPARTMENT STAFF IS NOT AVAILABLE,
CONTACT THE SAN DIEGO POLICE NON-EMERGENCY AT (619) 531-2000.**