

City of Crescent City - Reservation Form
for the Cultural Center located at 1001 Front Street

Mailing address: 377 J Street, Crescent City, CA 95531

Telephone: 707-464-9506 Ext. 226 Fax: 707-465-4405

Applicant / Organization _____

Contact Person(s) _____

Address _____ Telephone _____

Party / Wedding _____ Government Agency _____ Commercial Use _____

Not for Profit Organization _____ Organized meeting _____ Other _____

Reservation Date _____
Time Event Begins _____ Time Event Ends _____

A fifty dollar (\$ 50.00) non-refundable reservation fee is required to hold date reserved.

Will Alcoholic Beverages be served? _____ If yes, a \$575.00 deposit is required.

Indicate items needed: Lectern _____ Auditorium _____ Atrium _____

Kitchen _____ Stove/Oven Pilot Light _____ Presentation Screen _____

Emergency After-hours Contact # 707-951-5928

Indicate Number needed for each of the following:

Round Tables (29 available) _____ Chairs (230 red, 50 black available) _____

8 ' Rectangular Tables (26 available) _____

Number of Participants _____ Name & Phone # of Caterer _____

If food is being served to general public, a permit may be required, phone DN County Health Dept 464-7227.

**** A CERTIFICATE OF INSURANCE LISTING THE CITY AS ADDITIONAL INSURED**

IS REQUIRED (SEE NEXT PAGE FOR DETAILS) **

Insurance Requirements

All events require that the applicant provide an insurance certificate and endorsement. Applicant may provide own insurance or may purchase through the City of Crescent City.

GENERAL LIABILITY POLICY REQUIREMENTS:

Policy shall be for a minimum of \$1,000,000.

The City of Crescent City shall be named as an additional insured on this policy. This language contained therein should be: the City of Crescent City, its officials, officers, employees and volunteers are named in all liability policies described above as insured's as respects: A) activities performed by the City by or on behalf of the named insured, B) products or completed operations of the named insured, and C) premises owned, leased or used by the named insured.

A "Certificate of Insurance" listing the City of Crescent City as an additional insured shall be submitted to:

BROOKE TRUDEAU
CITY OF CRESCENT CITY
377 J STREET
CRESCENT CITY, CA 95531

If you have any questions, please contact City Hall at (707) 464-9506 ext. 226.

The certificate must come directly from your insurance carrier. Your insurance agent may fax us the certificate at (707) 465-4405, provided the hard copy follow by mail.

Once the certificate is received, your application for use of City Facilities will be processed for approval.

Rental Agreement for Cultural Center - City of Crescent City

A reservation fee is required to secure the selected reservation date, which is non-refundable if the reservation is canceled. If the date is changed at least thirty (30) days in advance, the reservation fee can be used for the new date. The total rental charge must be paid prior to the use of the property. The renter agrees and understands that it is his/her responsibility to make the full payment of the rental fee and that no further billing will be undertaken by the City, except in the case of damage, excessive supplemental cleaning done by the City, or additional fees due to changes in actual time the facility is used. All applicants shall be at least 18 years old.

The undersigned user agrees to pay for any and all damages occurring during the rental period shown on this agreement. User acknowledges that the damage deposit (s) paid herewith will be applied toward damages to the facility or its contents during the rental period. Any of the deposit (s) not applied toward damages will be applied first to unpaid rental fees, with any excess refunded to user. Normal wear and tear shall not be considered as damages.

The undersigned user understands that he / she is responsible for cleaning the kitchen area and stove if it has been requested or used. There will be an additional charge of \$ 40.00 per hour for excessive supplemental cleaning if the facility and or kitchen has not been left in a clean and orderly manner.

The City is NOT responsible for any items left in the facility.

Staples are not to be used to attach anything to the walls or other fixtures of the Cultural Center.

Title 19: State Fire Marshall Regulations

1. All decorative material, including Christmas trees shall be made from non – flammable material, or shall be treated and maintained in a flame retardant condition.
2. Exit lights shall not be covered or the light bulbs removed.
3. Exit doorways shall not be obstructed or doors chained or tied shut.
4. No flammable or combustible liquids shall be used, placed, or handled within the building.
5. The number of occupants shall not exceed the posted capacity.

The City of Crescent City does not discriminate on the basis of handicap status in the admission of, access to, treatment of, or employment in, its programs or activities.

Any user / tenant / lessee of a City Facility must comply with the requirements of the Americans with Disabilities Act (ADA), including accessibility.

I / We agree to abide by the City ordinances; Rules and Regulations which pertain to the use of the City's Cultural center and agree to pay for any damages to same, as a result of use.

I / We agree to hold the City, its officials and employees harmless from any liability resulting from the use of the City's Cultural Center and the area surrounding the facility.

Name of Applicant Organization (or name of individual if not an organizational or governmental applicant)

Name of person authorized to sign on behalf of the above listed organization

Signature _____ Date _____

Cultural Center Rental

Applicant: _____

Calculation of Rental Fees

Address: _____

Date(s) of rental: _____

EVENT RESERVATION

Event Reservation Fee: (non-refundable) \$ 50.00
Date paid _____ Receipt # _____ \$(_____) \$ _____

BASIC RENTAL FEE

Fee: \$685.00 per day \$ _____
Fee: \$150.00 per additional day x _____ day(s) \$ _____
Less non-profit or governmental discount (25%) \$(_____)
 Weddings, Reunions, Parties not included
Total Basic Rental Fee \$ _____

OTHER RENTAL CHARGES

Excessive Supplemental Cleaning @ \$40.00 per hour x _____ hour(s) \$ _____
Insurance (if purchased at City/Diversified Risk Policy) \$ _____
Damage and Key deposit (\$75.00) With Alcohol (\$575.00) \$ _____
 When key is returned, deposit will be refunded within 4-6 weeks if no damages

TOTAL RENTAL FEE \$ _____

FOR STAFF USE ONLY

Payment received: Date paid _____ Receipt # _____ \$(_____)
Payment received: Date paid _____ Receipt # _____ \$(_____)
Certificate of Insurance to A/P _____
Additional fees: YES / NO _____ \$ _____

REFUND

Date key returned _____ Apply damage/key deposit \$(_____)
Deposit refund request to A/P _____ Amount of Refund \$(_____)
Refund Approved by _____ Date: _____

**ADDITIONAL AGREEMENT
CULTURAL CENTER RENTAL**

1001 Front Street
Crescent City, CA 95531
(707) 464-7483

Initials

1.	I understand that I/we cannot begin using the Cultural Center (or start bringing in food, decorations, etc.) prior to 5:00 a.m. on the date of rental unless expressly authorized in writing. I/we also understand that there is no blocking the driveway.	
2.	I understand that everything must be removed from the facility by midnight on the day of rental unless expressly authorized in writing. This includes all food, decorations and any other items that do not belong at the Cultural Center.	
3.	I understand that the Council desks/podiums are not available for use and I <u>will not</u> move them. (Note: If you would like the desks moved to the side of the stage the City will be happy to move them for you).	
4.	I understand that staples, tacks or nails <u>are not</u> to be used to attach anything to the walls or other fixtures of the Cultural Center, including the deck or railing.	
5.	I understand that I will be responsible for any broken or damaged tables and chairs. If there is any damage or the facility is left dirty, I understand the costs will be deducted from my deposit. If costs exceed the deposit amount, I will pay the additional costs within 10 days.	
6.	I understand that I am responsible for cleaning the facility after my event, including the kitchen, bathrooms, deck, atrium, and auditorium. I understand the City of Crescent City will be responsible for the tear-down of ALL tables and chairs. I understand that any excessive supplemental cleaning required by the City of Crescent City employees will be billed to me at \$40.00 per hour per employee, and that the fees will be withdrawn from my security deposit first, with any excess being due within 10 days.	
7.	I understand that any containers to hold kegs or other beverages must be pre-approved. They must not leak or allow condensation.	
8.	I understand that all candles cannot have any open flame exposed. All candles must be pre-approved prior to event.	
9.	I understand that all paperwork including the actual set up is due to the city <u>at least two weeks</u> before the event. If not, there may be additional charges.	
10.	I understand that smoking is prohibited. This includes inside and outside the facility and park grounds.	
11.	I understand that access is NOT permitted to the upper levels of the facility.	

Signature

Date

Printed Name

Event Date

CRESCENT CITY CULTURAL CENTER

PLEASE INDICATE LOCATION OF : CHAIRS, TABLES, PODIUM, FLAGS, BAR, ETC.

SCALE 1"= 15'

