

## AVAILABLE TO HERMOSA BEACH RESIDENTS ONLY - APPLICANTS MUST PROVIDE VALID PROOF OF RESIDENCY

Name:			Birthdate:			
Address:			City:		Zip:	
Phone:		Email:	Email:			
Event (to be	noted on reservat	ion signs):				
Day:		Date:		Time:		
<u>AREA IN PARK</u>	TO BE RESERVED: (PI	ease refer to the map a	ttached and cl	heck which area you w	ould like to reserve)	
□ BBQ #1	□ BBQ #2	🗆 Play Area	🗆 Amphil	heatre/Bounce Hous	se 🛛 🗆 Fire Pit	
NUMBER OF PI	EOPLE EXPECTED: Ac	dults: Children:	LIMIT 25 PEOI		L CODE 12.30.010	
a fee waiver \$27 - Bound \$27 - Fire P ORGANIZATH assume all ris thereon, and agents, or er personal pro damage sus our organiza	ce House Permit it Permit <u>ON ASSUMPTION C</u> sks for injuries arising d further agree to r mployees, arising c perty located ther tained to the city p tion. We agree to	DF RISK AND RELEASE O g out of or resulting from make no claim whatso but of or resulting from reon. We shall be per premises, furniture or e	<u>DF LIABILITY</u> : O om the use of bever for injuri the use of an sonally respor equipment be the rules, re	n behalf of our organ Valley Park and/or p es against the City of y city building, grour hsible, on behalf of or cause of the occupo gulations and policie	personal property locate f Hermosa Beach, it's	
Signature:			Date:			
Payments	with check or cash	r Method of Payment n require in-person pro submitted electronico	ocessing of the	e reservation applica	Discover AME: ntion during office hours. k or cash payments.	
Card Number:			Expiration Date:			
CVC:	*the d	igits of the number on	the signature	strip located on the	back of your card.	
Card Hold	der Signature:					

