

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

Name:		Birthdate:		
Address:		City:	Zip:	
Phone:	Email:			
Event (to be noted on res	servation signs):			
Day:	Date:	Time	e:	
AREA IN PARK TO BE RESERV	ED: (Please refer to the map attach	ned and check which ar	ea you would like to reserve)	
□ BBQ #1 □ Play A	rea			
NUMBER OF PEOPLE EXPECT	ED: Adults: Children: LIN	NIT 25 PEOPLE PER CITY N	UNICIPAL CODE 12.30.010	
	olication fee and 4-hour rental slot) profit groups are required to provid	le a verifiable Non-Profit	ID number to qualify for a fee	
assume all risks for injuries thereon, and further agree agents, or employees, and personal property locate damage sustained to the our organization. We agr	ee to make no claim whatsoever ising out of or resulting from the d thereon. We shall be persona e city premises, furniture or equip	ne use of South Park or r for injuries against th use of any city buildin Illy responsible, on bel oment because of the erules, regulations and	and/or personal property located ne City of Hermosa Beach, it's ng, grounds, real property, or	
Signature:			Date:	
Payments with check o	, ,		application during office hours.	
Card Number:			Expiration Date:	
CVC:*the	e last 3 digits of the number on th	he signature strip locc	ited on the back of your card.	
Card Holder Sianatur	e:			

