



# FACILITY USE/RENTAL APPLICATION

## Step 1: INFORMATION

Applicant/Organization Name		Phone
<hr/>		
Street Address	City	Zip
<hr/>		
Is the applicant a City of Beaumont resident/business? (Proof of residency required)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<hr/>		
Applicant email: _____		
<hr/>		
Alternative contact person: _____		
Name		Phone

## Step 2: EVENT

Event Name: \_\_\_\_\_

Type of Event: ☐ Meeting ☐ Birthday ☐ Reception/Banquet ☐ Shower (Baby or Bridal)  
☐ Wedding ☐ Other: \_\_\_\_\_

# of Attendees: \_\_\_\_\_ Date(s) of Use: \_\_\_\_\_ Period of Use: ☐ One-time ☐ Re-occurring

Set-up Time: \_\_\_\_\_ to \_\_\_\_\_ Event Time: \_\_\_\_\_ to \_\_\_\_\_ Clean-up Time: \_\_\_\_\_ to \_\_\_\_\_

*\*Rental hours requested must include set-up and clean-up time.* **TOTAL HOURS:** \_\_\_\_\_

## Step 3: DETAILS

Is the applicant a non-profit organization? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, non-profit #: _____ Is the event a fundraiser? <input type="checkbox"/> Yes <input type="checkbox"/> No Is the event open to the public? <input type="checkbox"/> Yes <input type="checkbox"/> No Is there an admission fee? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will alcoholic beverages be <b>SOLD</b> ? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, an ABC license will be required.</i> Will alcoholic beverages be <b>SERVED</b> ? <input type="checkbox"/> Yes <input type="checkbox"/> No Will food be served? <input type="checkbox"/> Yes <input type="checkbox"/> No Will you have any of the following: <input type="checkbox"/> DJ <input type="checkbox"/> Band <input type="checkbox"/> Caterer: _____
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## Step 4: FACILITY

Albert A. Chatigny Sr. Community Recreation Center – 1310 Oak Valley Parkway

☐ Meeting Room ☐ Gymnasium ☐ Outdoor Stage ☐ Fitness Room ☐ Kitchen

Beaumont Civic Center – 550 E. Sixth Street

☐ Meeting Room ☐ Auditorium

Will you require the use of City-owned equipment? ☐ Tables/Chairs ☐ Microphone/Sound system  
☐ Other: \_\_\_\_\_

### Step 5 – SIGNATURE

To the fullest extent permitted by law, Applicant agrees to defend, indemnify and hold harmless CITY, its employees, agents and officials, from any liability, claims, suits, actions, arbitration proceedings, administrative proceedings, regulatory proceedings, losses, expenses, damages or costs of any kind, whether actual, alleged or threatened, actual attorneys' fees incurred by CITY, court costs, interest, defense costs, including expert witness fees and any other costs or expenses of any kind whatsoever without restriction or limitation incurred in relation to, as a consequence of or arising out of or in any way attributable actually, allegedly or impliedly, in whole or in part to the issuance of this Permit and Event(s) and Activities held pursuant to the Permit, except to those liabilities caused by the sole negligence of the city as determined by a court of law. Applicant's obligation to defend, indemnify and hold harmless shall include any and all claims, suits and proceedings in which Applicant (and/or Applicant's agents and/or employees) is alleged to be an employee of CITY. All obligations under this provision are to be paid by Applicant as they are incurred by CITY. This provision survives the expiration of the Event and the Permit.

Applicant Name

Applicant Signature

Date

Please return signed and completed application to the  
BEAUMONT PARKS AND RECREATION DEPARTMENT  
1310 Oak Valley Parkway, Beaumont, Ca 92223  
(951) 769-8524 | Parks@BeaumontCa.gov | BeaumontCa.gov

### OFFICE USE ONLY

- ☐ Proof of residency, non-profit status, etc.
- ☐ Copy of insurance
- ☐ Copy of ABC permit if applicable
- ☐ Signed Rental Contract
- ☐ Event layout
- ☐ Clean Up Checklist
- ☐ Room/Facility Assignment: \_\_\_\_\_

#### User Group Classification:

- ☐ **Group A:** City of Beaumont sponsored and co-sponsored classes, events and programs, governmental agencies serving Beaumont' residents and the Beaumont Unified School District.
- ☐ **Group B:** Beaumont based non-profit organizations.
- ☐ **Group C:** Beaumont resident or business.
- ☐ **Group D:** Non-Beaumont resident, non-profit based outside of Beaumont, or businesses.

#### Fee Worksheet:

	FACILITY:	Add. Facility:	Add. Facility:	SUBTOTAL
First two hours				
Add. hours				
Staff time				
Deposit				
TOTAL				

#### STAFF APPROVAL:

SIGNATURE

DATE



## FACILITY USE/RENTAL APPLICATION

ALBERT A. CHATIGNY SR. COMMUNITY RECREATION CENTER			
	Deposit	Private	Non-Profit
*Multipurpose Room 2 or 3 Occupancy 16	\$100	\$50/Hour	\$40/Hour
*Classroom 1 or 3 RM 1 Occupancy 20 RM 3 Occupancy 25	\$100	\$50/Hour	\$40/Hour
*Dance/Fitness Room Occupancy 25	\$250	\$65/Hour	\$50/Hour
Kitchen	\$250	\$150/Day	\$150/Day
*Gymnasium Occupancy 700	\$500	\$150/Hour	\$125/Hour
Building Attendant <i>Required for events after regular business hours</i>	N/A	\$20/Hour	\$20/Hour
<i>*Two (2) hour minimum</i>			
<i>Reservations require insurance</i>			

BEAUMONT CIVIC CENTER			
	Deposit	Private	Non-Profit
*Gymnasium Occupancy 500	\$500	\$150/Hour	\$125/Hour
Building Attendant <i>Required for all events</i>	N/A	\$20/Hour	\$20/Hour
<i>*Two (2) hour minimum</i>			
<i>Reservations require insurance</i>			

COMMUNITY PARK PAVILIONS			
	Deposit	Private	Non-Profit
Pavilion	\$250	\$25/Hour	\$25/Hour
Restroom Key	\$50	N/A	N/A
<i>Reservations require insurance</i>			

**ALL FEES EFFECTIVE JULY 1, 2023**