



Reservation Form Zittel Family Amphitheater and Peter T Lewis Greenroom

Please note: Rental is not confirmed until your form is received, approved and deposit is paid.

Name of Organization/Renter: _____

Contact Person: _____

Address: _____

City: _____ Zip: _____

Contact Phone: _____ Alternate Phone: _____

Email: _____

NAME OF EVENT: _____

AMPHITHEATER REQUEST DATE: _____ ALTERNATE DATE: _____

HOURS OF USE: _____ TO _____

PURPOSE OF USE: _____

NONPROFIT (DOCUMENTATION REQUIRED) ☐ YES ☐ NO EST. ATTENDANCE: _____

TICKETED EVENT? ☐ YES ☐ NO GREEN ROOM RENTAL: ☐ YES ☐ NO

Renter is responsible for amphitheater cleaning, whether financially or by providing your own service.

CLEAN UP PROVIDED BY RENTER? ☐ YES ☐ NO

DO YOU PLAN TO SERVE OR SELL ALCOHOL? ☐ YES ☐ NO

If yes, an ABC permit is required.

DO YOU PLAN TO SELL GOODS? ☐ YES ☐ NO

If yes, an Environmental Management Permit is required for food or beverage sales.

DO YOU PLAN TO HIRE SECURITY FOR YOUR EVENT? ☐ YES ☐ NO

INSURANCE REQUIREMENTS

Concurrent with the execution of this Use of City Facilities permit, user shall provide evidence of liability insurance with a minimum amount of \$1,000,000 per occurrence with \$2,000,000 in general aggregate and a separate endorsement naming the City of Folsom, the FHDA, it's officers, agents and employees as an additional insured. User further agrees to indemnify, defend and hold harmless the City of Folsom, the FHDA it's officers, agents, and employees against any claims, demands, damages, costs, expenses of whatever nature, including court costs and attorney fees arising out of or resulting from user's use of City of Folsom facilities.

My signature below certifies that I have read the conditions as set forth by the Folsom Historic District Association governing the use of items specified above, that I and/or my organization/team will take full responsibility for seeing that the use of these facilities/areas by the organization/team/self I represent will be in full adherence and compliance with these conditions, that I/we will hold the Folsom Historic District harmless from any damages, claims for damage for personal injury or death, damage to, or loss of property incurred in the use of these facilities/areas.

Signature: _____ Title: _____

Print Name: _____ Date: _____

OFFICE USE ONLY

Calendared _____

Ins. Rec'd _____

Deposit Rec'd _____

Permit Copy Rec'd _____

Full Payment Rec'd _____

Gm. Rm. Dep. Rec'd _____

Gm. Rm. Dep. Ret'd _____

Gm. Rm. Rental Amt. _____

ABC Permit Rec'd _____

Env. Mgmt. Permit Rec'd _____