



Application for Use of Indoor City Facilities

(APPLICATION MUST BE SUBMITTED IN PERSON)

Submission of application does not guarantee a reservation until approval by the Community Services Director or his/her designee.

Name of Applicant (s) _____

Phone numbers: Cell _____ Home _____ Email _____

Address _____ Unit # _____

City _____ Zip Code _____

A valid picture I.D. is required at the time of application to verify age and/or residency.

Proof of Signal Hill Residency (if applicable): Driver's License Current Utility Bill Employed in Signal Hill

I certify that I am a resident of Signal Hill and that I will be onsite at the event for the entire duration of the event. I understand that if I am found to be renting the facility for a non-resident, the non-resident fees will be deducted from my deposit.

→ Initials: _____

Refundable damage deposit will be mailed to the address provided 6 to 8 weeks after your event

Description of Event: _____

Event time should reflect setup and cleanup. *Please allow a minimum of one hour for cleanup.*

Event Date: _____ Event Day: _____ Rental Start time: _____ Rental End time: _____

Space Requested :

Community Centers

Discovery Well Park Community Center (standard room set up 6 round tables and 36 chairs diagram) **Only 36 seating max**

Will food be served? Yes No (no red food/drink)

Will event be professionally catered? Yes No If yes, name of catering company _____

Will the event include musical entertainment? Yes No If yes, what type? Band DJ Radio Bluetooth Speaker

Signal Hill Park Community Center (attach room set up diagram) **Capacity: 100**

Available Rental Times: 8:00am-10:00pm Monday, Tuesday, Wednesday, Thursday / 8:00am-10:00pm Friday, Saturday, & Sunday

Will food be served? Yes No (no red food/drink)

Will event be professionally catered? Yes No If yes, name of catering company _____

Will the event include musical entertainment? Yes No If yes, what type? Band DJ Radio Bluetooth Speaker

***Room & carpet condition has been viewed INITIALS: _____

Library Facilities

Library Community Room (attach room set up diagram) **Capacity: 48-70 (depending on room set-up)**

Available Rental Times: 8:00am-10:00pm Monday, Tuesday, Wednesday, Thursday / 8:00am-11:00pm Friday, Saturday, Sunday

Will food be served? Yes No (no red food/drink)

Will event be professionally catered? Yes No If yes, name of catering company _____
♦ Small serving kitchen included

Will the event include musical entertainment? Yes No If yes, what type? Band DJ Radio Bluetooth Speaker

Library Zinnia Courtyard **Capacity: 54**

Only available when the library is closed.

Available Rental Times: 5:00pm-10:00pm Wednesday, Friday, Saturday / 8:00am-10:00pm Sunday

Will food be served? Yes No (no red food/drink)

Will event be professionally catered? Yes No If yes, name of catering company _____

Will the event include musical entertainment? Yes No If yes, what type? Band DJ Radio Bluetooth Speaker

Library Community Room & Zinnia Courtyard Capacity: 80

Only available when the library is closed.

Available Rental Times: 5:00pm-10:00pm Wednesday, Friday, Saturday / 8:00am-10:00pm Sunday

Will food be served? Yes No (no red food/drink)

Will event be professionally catered? Yes No If yes, name of catering company _____

Will the event include musical entertainment? Yes No If yes, what type? Band DJ Radio Bluetooth Speaker

Library Learning Center (attach room set up diagram) **Capacity: 35**

Available Rental Times: 12:00pm-8:00pm Monday, Tuesday, & Thursday / 10:00am-5:00pm Wednesday, Friday, & Saturday
Closed on Sundays & Holidays

- ♦ Pre-packaged snacks and bottled drinks only

Signal Point Terrace (attach terrace set up diagram) **Capacity: 160**

Available Rental Times: 8:00am-8:00pm Monday – Sunday

Will food be served? Yes No (no red food/drink)

Will event be professionally catered? Yes No If yes, name of catering company _____
♦ Small serving kitchen included

Use of sound system? Yes No

*** Existing speaker for sound only & microphone use. No live music or DJ permitted on Signal Point Terrace.

EXPECTED ATTENDANCE: Adults _____ Children _____ **Total Attendance** _____

Is the public invited? Yes No Will admission/donations be charged/accepted? Yes No

APPLICANT VERIFICATION

I, the undersigned, on behalf of the above named organization, do hereby agree to indemnify the City of Signal Hill, according to the attached indemnification form, and to abide and enforce the rules, regulations and policies governing the facility as set forth by the City of Signal Hill.

SIGNATURE OF APPLICANT: _____

DATE: _____