

Authorized Signer

Santa Cruz County Parks

979 17th Avenue Santa Cruz CA, 95062

Ph: (831) 454-7901 – Fax (831) 454-7940 www.scparks.com

General Park Use Permit Request

In order to evaluate your request for approval, please email your request form to: reservations@scparks.com

Customer or Authorized Agent Account Information:

*An authorized agent for the organization/company must provide personal contact information below

Name _				
Email_		Ph	Phone# ()	
Home a	address		City	
State _	Zip Code	Gender	Birthdate	
<u>Organiz</u>	zation Name (if applicable)			
Address	S			
City	State	Zip Code	Non-Profit #	
<u>Please</u>	fill out and select the following	reservation details:		
Park		Area requested_		
		-		
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Please	select from the following types of	rental/ activities:		
	Park trails			
	Court sport (tennis or basketball)			
	Surf contest			
	Class or organized group activity			
	Jump house at Felton Covered Bridge Park			
	Parking lot rental			
	Courthouse steps or portion of grounds at County Government Center			
	Other:		_	
Please	provide any other pertinent inform	nation to consider with the	his request:	
We will provide rental/a	contact you to confirm receipt o you with specific Conditions	f the request and may re of Use to accompany liability insurance may	County Parks will evaluate the proposed request equire additional information. If approved, we wil a reservation permit, based upon the type of be required for any activity deemed higher risk on of the Department.	

Date