

Santa Cruz County Parks

979 17th Avenue, Santa Cruz, CA 95062 831.454.7938 reservations@scparks.com scparks.com

General Use Permit Request Form

Customer or Author	ized Agent Name			
Birthdate	Gende	er		
Phone	Email			
Home Address				
City		State	Zip	Code
Organization/ Com	pany Name			
Nonprofit Tax ID#				
Address				
City		State	Zip	Code
Type of Event				
Date(s) Requested				
Time Requested				
	Including all set up and a	clean up time.		
Number of People	This includes your guests, staff, volunteers, and vendors.			
Park	Area Requested			
Type of Use	□ Class or organize	d group activity		urthouse steps
	☐ Park Trails	-+		tion of grounds at the County
	☐ Cross Country Me☐ Surf Contest	et		vernment Center rking Lot Rental
	□ Jun Contest			ner (describe below)
Please provide any	other pertinent informatio	on to consider with t	this reque	st.
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I have read and und policy.	erstand all policies detaile	d in the Conditions	of Use. I aç	gree to the cancellation
Requestee Signatur	e			Pate