



Santa Cruz County Parks
 979 17th Avenue
 Santa Cruz CA, 95062
 Ph: (831) 454-7901 – Fax (831) 454-7940
www.scparks.com

Picnic Area Use Permit Application

Name of Permittee: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Email Address _____
 Day Phone _(_____) _____ Cell Phone _(_____) _____
 Company/ Organization (if applicable) _____
 Non-Profit # _____

Please fill out and select the following reservation details:

Date(s): _____
 Type of event: _____ Number of people expected: _____

Park

- Anna Jean Cummings Park: ___ Picnic Area A ___ Picnic Area B ___ Picnic Area AB
- Brommer Street Park
- Pinto Lake County Park: ___ Pavilion A ___ Pavilion B
 - Requires a \$50.00 refundable deposit with payment of rental fees
 - Sound Permit (Pinto Lake Pavilions Only): Weekends from May through September from Noon to 5:00 PM. Are you requesting a sound permit? Yes No

Reservation times

- Day reservation: 10:00 am – 7:30 pm (10:00 am – 7:00 pm at Pinto Lake)
- Hourly reservation*: Set-up start time: _____ Event time: _____ Clean-up end time: _____
 *Available weekdays or within 3 weeks of a weekend date, if available.

Will equipment, i.e. Jump House*, be used? Yes No If so, name of vendor: _____
 *\$50.00 fee and insurance required (must be paid at the time of booking; see Jump House Terms and Conditions of Use)

Disclaimer:

The undersigned states: The information I have provided to Parks is true and correct; If this Permit is issued to a group or entity, I am the authorized representative of the group or entity, and I am empowered to make this agreement on its behalf; I have received a copy of the Terms and Conditions and Assumption, Waiver, and Indemnity documents, and have read and understand them. Both individually and on behalf of the group or entity, I agree to them, and will comply with them as well as all laws and ordinances of the County of Santa Cruz, the State of California, and the United States.

 Permittee Signature

 Date

Type of payment: **Check** Payable to Santa Cruz County Parks **Cash**

I authorize use of my **MasterCard** **Visa**

Print name as it appears on card: _____

Card Number: _____ - _____ - _____ Expiration Date _____

Signature _____ Date _____

Department Use Only:

County Parks Approval: _____

Contract #: _____ Confirmed Date: _____