

CITY OF SCHERTZ

SMALL PAVILION RESERVATION APPLICATION AGREEMENT AND RELEASE

Facility Reserved:

501 Oak St.	FULL DAY _____	6:00am – 2:00pm _____	3:00pm -11:00pm _____
102 Aero Ave.	FULL DAY _____	6:00am – 2:00pm _____	3:00pm -11:00pm _____
64 Poplar	FULL DAY _____	6:00am – 2:00pm _____	3:00pm -11:00pm _____

Date of Event: _____ Time of Actual Event _____ to _____
Name: _____ Organization: _____
Address: _____ City, State & Zip _____
Phone: _____ Work Phone: _____
Email: _____

Type of Event: _____ Number of Participants _____

Will you be using electricity? **YES or NO** If yes, what for? _____

Please list some elements of your event: (i.e. catering, bouncy house, entertainment) _____

Will there be alcohol present? **YES or NO**

If yes, security is required to be present at an event where there is alcohol present or as the Police Chief deems necessary. An initial charge of \$15 to coordinate security is due at the time of booking. Security will need to be paid in cash at the start of the event. Fee is \$30/hr.

No food, beverages or other items will be sold without written permission of the City Manager or the Community Services Director. **No glass containers are allowed in the park.** Any breach of this reservation agreement will nullify the agreement and use of the facility (ies) under this agreement will be terminated. The person named below will be responsible for seeing that the facility (ies) named in this agreement are free of damages and excessive litter.

I hereby release and indemnify the CITY OF SCHERTZ, Texas (“the City”) from and against all liabilities, judgments, costs, damages, and expenses that may be charged to or recovered from the City on account of damaged to the property of, injury to, or death of any person arising from the use and occupancy of the City’s Parks and Recreation facilities on

I have read and understand the terms of this agreement and agree to abide by same:

*PRINTED NAME _____

*SIGNATURE _____

Office Use Only:

Received By: _____ Date: _____

Rental Fee: _____ (415.4) Paid Date: _____ Check, Cash or CC

Security Requested Date _____ Name of Security Officer _____

