

Facility Reservations Packet

Calabasas Tennis and Swim Center
23400 Park Sorrento Calabasas, CA. 91302

ROOM PARTY



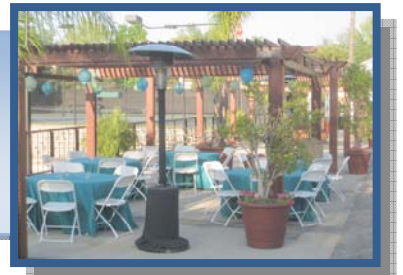
POOL PARTY



MEETINGS



PATIO PARTY



Reservations:

Kathy Milbrand

(818) 222-2782 ext. 113

www.calabasasTSC.com

Fax (818) 222-8602

e-mail kmilbrand@cityofcalabasas.com



CITY of CALABASAS

ROOM PARTY

Reservations are accepted on the first come, first served basis.
To reserve a date and to be placed on the Master Schedule.

Step #1 check on availability / Security Deposit

- Check on availability with Kathy Milbrand at The Center (818) 222-2782 ext. 113 or e-mail: kmilbrand@cityofcalabasas.com.
- Complete Paperwork & Security Deposit \$150.00 less 100 people
\$300.00 over 100 people
Security Deposit is refundable if the facility is return to its original state.

Step #2 choose a room / area

Facility Rental Fees

<u>Rental Areas</u>	<u>Maximum Capacity</u>	<u>Hourly Fee</u>
Fireside Room	46	\$40.00
Center Court Room (Dance Floor)	67	\$50.00
Center Court & Fireside Rooms	113	\$75.00
Tennis Patio	200	\$45.00
Pool Patio	200	\$45.00

A selected number of tables & chair are available for events.

No amplified music is not permitted outdoors (no boom boxes or D.J.'s)
All events must end at midnight.

Step #3 Insurance

Every party must have General Liability to hold an event at the Center. Two options:

Option 1: If you have Home owner insurance over \$1,000,000.00 and name The City of Calabasas (100 Civic Way, Calabasas, CA. 91302) as additionally insurer on the certificate with a endorsement. And present *the Certificate to the Center before your event*.

Option 2: Purchase the insurance through The City.

Room party less than 100 guest	\$84.00
Room party more than 100 guest	\$117.00

Step #4 Catering

All food & Beverages **MUST** be provided by our on-site caterer, Sean Michael catering (818) - 222-0226. Please call for menus and prices. To see a sample menu check out calabasasTSC.com catering page.

Name: _____
Organization: _____
Address: _____

City: _____ **Zip:** _____
Phone (H): _____
(W): _____
(Fax): _____
(Cell): _____
E-Mail: _____

Event Date

 Start time

 End time

 Approx. # of people

 Type of Event

Please Circle the Areas Requested

Fireside Room **Center Court Room** **Tennis Patio** **Pool Party**

Activities/Entertainment Planned: _____
 (Your entertainment **MUST** supply CTSC proof of insurance prior to your event)
 Is the City going to be insurance provider? YES NO

RELEASE AND INDEMNIFICATION AGREEMENT

Important - Read thoroughly before signing:

The applicant is solely responsible for any damage, loss, accident or injury to persons or property resulting from the use of the City of Calabasas' facility. Applicant shall be responsible for control and supervision of the people in attendance during the use of the facility and shall see that no damage is done to furnishings, fixtures or any part of the facility. Any violation of the Rules & Regulations can result in a denial of further permits and, in case of damage to a facility, financial reimbursement by the undersigned applicant.

I, the undersigned, have received and read a copy of the Rules and Regulations concerning the use of City facilities and agree to comply with them. I, or my representative, agree to be present during the entire period of use of the facility by the applicant organization.

In consideration of the City of Calabasas permitting the use of its facilities, I individually and on behalf of my successors, heirs, administrators and assigns, agree to hold harmless, indemnify and release the City, its governing board, employees, officers and agents from any and all actions demands and/or claims for damage or injury, including claims for negligence which may arise from or in connection with the use of said facilities. Furthermore, I hereby agree that the City of Calabasas, its employees or officers may act in an emergency as best fits the situation if efforts to contact me or any other responsible person fail.

Signature of Applicant _____

Date _____

Fee Calculation:	FOR OFFICE USE ONLY
Deposit: \$ _____ Deposit Received: _____ Check #: _____	
Name on Credit Card: _____	
Credit Card Only CC# _____ Exp _____	
Insurance: \$ _____ Insurance Received: _____	
Fee: \$ _____ per Hour X _____ Hours = \$ _____	
Fee: \$ _____ per Hour X _____ Hours = \$ _____	
TOTAL: \$ _____	
\$10.00 per Hours X # of _____ Lifeguards = \$ _____	

_____ SEC. DEP.	_____ REFUND
_____ INS.	_____ CALNDR
_____ FEES	_____ POOL APR.

Conf. _____ TY _____ Cert. _____ PW _____

Facility Usage Guidelines & Policies

1. Applications and appropriate deposit for use of the City Facilities MUST BE submitted to the Calabasas Tennis & Swim Center, C/O facility reservations, 23400 Park Sorrento, Calabasas, CA. 91302. Applications will be accepted on a FIRST COME-FIRST SERVE BASIS.
2. Applicant MUST be at least 21 years of age.
3. A liability insurance certificate of \$1,000,000.00 (naming the Calabasas Tennis & Swim Center as an additional insured) is required and available through the City of Calabasas All corporations renting the facility as well as Third Parties (**companies providing any kind of entertainment**) must name The City of Calabasas as additional insured on their liability policy (must be for at least \$1,000,000.00) for the day of the event.
4. Anyone finding it necessary to **Cancel A Reservation Date will be assessed the following fees:**

More than 90 days prior to event	25% of the security deposit fee
More than 45 days prior to event	50% of the security deposit fee
More than 30 days prior to event	75% of the security deposit fee
Less than 30 days prior to event	100% of the security deposit fee
5. The Calabasas Tennis & Swim Center on site catering MUST BE USED for ALL food & beverage needs at all events. NO EXCEPTION. Anyone who brings in unauthorized outside food will lose 100% of their security deposit and their event will be canceled immediately.
6. **Activities involving persons under 21 years of age must be supervised by adults by a ratio of one (1) adult for every fifteen (15) minors.**
7. All parties must **end at midnight** and Facility must be cleaned and vacated no later than 1:00am.
8. **CTSC staff reserves the right to suspend any individual or group from using the facilities in the event their behavior is abusive or destructive, or violates and of the rules or regulations without refund.**
9. **The Calabasas Tennis & Swim Center Prohibits Smoking on its premises.**
10. A Security Deposit is REQUIRED for all reservations, payable at the time of the reservation. The Security Deposit is SEPARATE from the rental fee and can not be credited towards rent. Deposit is refundable provided the facility is returned in the same condition in which it was found and all hours occupied have been prepaid. **Any portion of the SECURITY DEPOSIT** may be held for: 1) Damages to building, furnishings or grounds. 2) Missing equipment or furnishings. 3) Any Facility left in unclean condition. 4) Occupation beyond reserved and pre-paid hours or additional staffing. 5) Required cancellation of reservation later than 30 days after the event if facilities are left in the same condition they were issued. 6) Bringing in outside food or Beverages (and your event will be cancelled immediately).

SETUP / CLEANING

1. Guests are allowed a ½ hour before the event to decorate. *Masking tape only; no cellophane tape, nails, tacks or staples in walls.* At no time should exits be covered or obstructed.
2. All special event equipment (stages, canopies, awnings, booths, umbrellas, archways, D.J. equipment, etc.), and all rental equipment must be approved two (2) weeks prior to the event. In some cases, a certificate of insurance will be necessary for the above items.
3. **Candles, open flames, Silly String, fog/smoke machines, bouncers and leaf blowers are not permitted.**
4. All Clean-up must be completed prior to check out time on the same day as the event. Renters are responsible for: a) Removing all decorations b) Verifying that all areas are clean that your guest may have occupied (this includes areas you may have not rented). PLEASE ADDRESS ANY DAMAGE LISTED ON THE FACILITY CHECKLIST; YOU COULD LOSE YOUR SECURITY DEPOSIT.

APPLICANT PRINTED NAME

DATE

APPLICANT SIGNATURE