

FACILITY USE CONTRACT

Phone: (760)726-1340, ext. 1575

Location Requested _____ Event Date _____

Person Responsible _____

(Must be 21 years of age and present during entire usage)

Event Sponsor _____

Address _____ City _____ Zip _____

Telephone (Day) _____ Telephone (Evening) _____

Fax No. _____

Driver's License No. _____ Date of Birth _____

Contact Person (Day of Event) _____

Intended Use _____

Estimated Attendance _____

Will there be music? _____ Live _____ D.J. _____ Other, describe _____

Music level may not exceed 72 DBAs

Alcoholic Beverage _____yes _____no

Sale of Alcoholic Beverage _____yes _____no

(Must have licensed caterer or obtain one-day license issued by Alcoholic Beverage Control Board and Responsible Server Training—*Rancho Adobe and Park Terrace only*)

Business Name of Licensed Caterer _____

Wedding Arch _____ yes _____ no *AVAILABLE RANCHO BUENA VISTA ONLY*

HOURS/TIMES

Rehearsal Date _____ Day _____

Rehearsal Time _____

Rehearsal Dinner Time _____

Event Date _____ Day _____

Event Time _____

Table/Chair Set-up Time _____

Preparation Time _____

Cleanup time _____

FEES

Basic Rent \$ _____
Discount for Sunday use (20%) \$ _____
 Rancho Buena Vista Adobe only
City of Vista Non-Resident Fee (10% of base fee) \$ _____
 Park Terrace, Rancho Buena Vista Adobe, and Thibodo only
Insurance \$ _____
Security \$ _____
Alcohol Fee (\$100) - Only beer, wine or champagne allowed at the Rancho \$ _____
 Buena Vista Adobe and Park Terrace
Rehearsal \$ _____
Rehearsal Dinner \$ _____
Additional Preparation Time \$ _____

SUB TOTAL \$ _____

Cleaning Service \$ _____
Umbrellas (\$10 each; Check: "Friends of Rancho") \$ _____

GRAND TOTAL \$ _____

Booking Payment Received (50% of basic rent) \$ _____ **Form of Payment** _____ **Date** _____
(50% of Booking Payment will be refunded if cancellation or notification received 90 days, or more, prior to event)
Security Deposit Received \$ _____ **Form of Payment** _____ **Date** _____
(Due 30 days prior to event)
Park Terrace Caterers Sec. Dep. \$ _____ **Form of Payment** _____ **Date** _____
(Due 30 days prior to event)
Final Payment Received \$ _____ **Form of Payment** _____ **Date** _____
(Due 30 days prior to event)

Date _____ **Approved By** _____

NOTE: If group exceeds departure time listed on use permit or if additional cleanup is needed at time of departure, this will be charged at user's hourly rental rate of \$ _____ per hour and deducted from the security deposit.

Applicant, for himself and the above group and all members thereof, hereby waives any and all rights to make a claim for any loss or damage that may hereafter accrue against the City of Vista, members of its City Council, its officials, employees and agents, arising out of the use of City property pursuant to this permit by reason of negligence or otherwise; and further agrees to indemnify and save free and harmless the City and said persons for any loss occasioned to City or said persons as a result of liability for bodily injury or property damage arising out of the use of said property pursuant to this permit by reason of negligence or otherwise.

Signature _____ Date _____ (Person Responsible) _____