

**CITY OF REEDLEY**  
**COMMUNITY SERVICES DEPARTMENT**  
*Application for Luke Trimble Memorial Swimming Pool Use*

Requested Day & Date: \_\_\_\_\_ Purpose: \_\_\_\_\_ Estimated Attendance: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street/Mailing Address City State Zip

Time of Activity: Begins: \_\_\_\_\_ am/pm Ends: \_\_\_\_\_ am/pm

Who do you want the refund to go to? (Name & Address): \_\_\_\_\_

*Rates and fees are subject to change upon City Council approval. City-sponsored or co-sponsored events will take precedence and may bump other reserved events. All fees are due when application is submitted (minimum of 10 working days prior to event).*

*I agree to follow all rules, regulations and policies of the City of Reedley on the use of this facility. I understand that I am responsible for any, and all, repair costs for damages caused during my event. Denial of future use of any City of Reedley facility for a period of two years and/or forfeiture of deposit shall occur if I do not comply with any rule, regulation, policy or requirement.*

*I understand the City of Reedley will not be held responsible for items brought to this activity as requested in this application which becomes lost, stolen or damaged before, during or after the activity. This is to include damage or loss due to any mechanical failure that may occur.*

*The City of Reedley reserves the right to require that the facility user provide adequate liability insurance coverage for the City and the user against claims for money or damages. The City requires a Certificate of Insurance showing that adequate coverage is in effect before the event can be held. The Lessee shall save, keep and hold harmless the City of Reedley, its officers, agents, employees, and volunteers from all damages, costs or expenses in law or equity that may at any time arise or be set up because of damages to property or personal injury received by reason or in the course of use which may be occasioned by any willful or negligent act or omissions of the Lessee, any of the Lessee's employees, or guest. The City of Reedley will not be held liable for any accident, loss or damage.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

-----OFFICE USE ONLY-----

Application Request:  Granted  Denied Reason for Denial: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Facility inspected on \_\_\_\_\_ by \_\_\_\_\_ Facility left in  good condition  unacceptable

Note deficiencies: \_\_\_\_\_

**Fees/Deposits**

_____ Deposit: \$150 (1-100 people) _____ Rental Fee 1-100 people - \$55/hr; 101-200 - \$80/hr _____ 2009 Insurance Fees: Class II- \$144.58/174.52 _____ <b>TOTAL</b>	Receipt# _____ Date: _____  Cash/Check#: _____  From: _____
<i>Additional fees may be required for special staff and/or equipment requests</i>	