



**CITY OF SANTEE  
COMMUNITY SERVICES DEPARTMENT  
USE OF CITY FACILITY: APPLICATION AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT  
Payment of Deposit Must Accompany Application / Confirmation of Use Is Subject To Scheduling Availability  
Email: [csdfrontdesk@cityofsanteca.gov](mailto:csdfrontdesk@cityofsanteca.gov) PHONE: (619)-258-4100 x222 FAX: (619)-258-4189**

**APPLICANT:**  
Name: \_\_\_\_\_ Phone [Day]: \_\_\_\_\_ [Eve]: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_ Type: [ ] Santee Service Organization or Public Agency  
Alternate Person to Contact: \_\_\_\_\_ Phone [Day]: \_\_\_\_\_ [Eve]: \_\_\_\_\_ [ ] Santee Resident or Business  
Representing Organization [if applicable]: \_\_\_\_\_ [ ] Non-Resident or Business

**FACILITY REQUESTED:**                      **DESCRIPTION OF ACTIVITY:**  
[ ] Civic Building #7    Activity Hall                      Purpose \_\_\_\_\_ Attendance: # Adults: \_\_\_\_\_ # Minors [under 18]: \_\_\_\_\_  
[ ] Civic Building #8A    Activity Room                      Is alcohol being served? [Y or N] \_\_\_\_ Will food be served? [Y or N] \_\_\_\_ If so, please describe: \_\_\_\_\_  
[ ] Civic Building #8P    Presentation Hall                      Will a sound system be used? [Y or N] \_\_\_\_ If so, please describe: \_\_\_\_\_  
[ ] Teen Center @ Big Rock Park

Based on attendance, room rental will include tables and chairs to accommodate your group. Additional equipment below is available for rent.

Item:	Qty:	Item:	Qty:	Item:	Qty:				
<b>Mark</b>		Table, round (5.5' diam)	_____	Belly Bar Table	_____	Lectern	_____	Digital Projector	_____
<b>Equipment</b>		Table, rect. (3'x8')	_____	TV	_____	Dance Floor (12'x12')	_____	_____	_____
<b>Desired</b>		Chairs	_____	Coffee Urn [60 cup]	_____	Dry Erase Easel (2'x3')	_____	_____	_____
		Bistro Set (table+2 chairs)	_____	Magnolia Trees (8')	_____	Flags (U.S. and state)	_____	_____	_____

**DATES AND TIMES DESIRED:**    1st Choice:                      2nd Choice:  
Date(s): \_\_\_\_\_ Time: \_\_\_\_\_ am/pm to \_\_\_\_\_ am/pm                      Date(s): \_\_\_\_\_ Time: \_\_\_\_\_ am/pm to \_\_\_\_\_ am/pm  
Including set-up    [ ] One Time: Day of the Week: \_\_\_\_\_                      [ ] One Time: Day of the Week: \_\_\_\_\_  
& takedown    [ ] Weekly: Day(s) of the Week: \_\_\_\_\_                      [ ] Weekly: Day(s) of the Week: \_\_\_\_\_  
[ ] Monthly: 1st\_\_ 2nd\_\_ 3rd\_\_ 4th\_\_ / S\_\_ M\_\_ T\_\_ W\_\_ Th\_\_ F\_\_ S\_\_                      [ ] Monthly: 1st\_\_ 2nd\_\_ 3rd\_\_ 4th\_\_ / S\_\_ M\_\_ T\_\_ W\_\_ Th\_\_ F\_\_ S\_\_

**RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT:**  
As lawful consideration for the above named individual/group being permitted to enter in or upon public facilities leased or owned by the City of Santee or by the Santee Community Development Commission on a reserved basis for the purpose named above, at the facility named above, I, the undersigned applicant, both individually and on behalf of the above-named group and its participants, agree to indemnify, defend and hold the City of Santee and the Santee Community Development Commission, their officers, employees and agents harmless and free from any liability of any nature arising out of, or related to, use of the public facility described above. This indemnification and Agreement to defend includes, but is not limited to, liability for damage or injury to any persons or property, costs and attorneys' fees arising out of or in connection with this use of public facility, regardless of whether the City or the Community Development Commission was actively or passively negligent, either solely or contributing in connection with such liability. I certify that I have received and read the rules governing the use of this facility. I, the undersigned, do hereby agree that we, I, and the above-named group will abide by the rules governing use of the facility and will be responsible for any damages to the facility or equipment caused by the occupancy of the facility. I, the undersigned, understand and agree that I and the group's participants enter the public facility at our own risk. I have carefully read this Agreement and fully understand its contents. I am aware this is a release of liability and sign it of my own free will. I am authorized to sign this Agreement and am over 21 years of age.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**APPLICATION / DEPOSIT OF \$** \_\_\_\_\_ **TYPE:** \_\_\_\_\_ **TAKEN BY STAFF:** \_\_\_\_\_

**Credit Card** PLEASE PRINT  
EXACT NAME ON CARD \_\_\_\_\_  
Card # \_\_\_\_\_  
Expiration Date \_\_\_\_\_ V-Code \_\_\_\_\_  
Signature **X** \_\_\_\_\_