



# STARN PARK RENTAL APPLICATION

City of Hughson  
7018 Pine Street / P.O. Box 9  
Hughson, CA 95326  
PH: 209-883-4054 / FAX: 209-883-2638

<b>Applicant Name:</b>	<b>Email Address:</b>
------------------------	-----------------------

<b>Address:</b>	<b>City/State/Zip:</b>
-----------------	------------------------

<b>Mailing Address (If Different):</b>	<b>City/State/Zip:</b>
--	------------------------

<b>Phone:</b>	<b>Alternate Contact:</b>	<b>Alt Phone:</b>
---------------	---------------------------	-------------------

<b>Event Date(s):</b>	<b>Days of the Week:</b>	<b>Requested Hours:</b>
-----------------------	--------------------------	-------------------------

**Type of Event:**

**Classification:**  General Public  Private **Event for a Minor:** Y / N

**Food:** Y / N  Served  Sold **Alcohol:** Y / N **\*A letter must be submitted to the Community Development Department to request approval of alcohol at any park event.**

**Food Prep:**  On Site  Off Site  Sold  Served

**Entertainment:** Y / N **Booth:** Y / N **Tent:** Y / N **Size of Tent:** \_\_\_\_\_

**Street Closure:** Y / N **\*Permit Required\*** **Inflatable:** Y / N **\*Permit Required\***

Entire Park \$150/\$250  LG Covered Area \$50  SM Covered Area \$35  Uncovered Ares \$30

Concession Stand \$25 (\$15 w/ Area/Field Rental) **Field:** Y / N **Lights:** Y / N

**\*\* PROOF OF LIABILITY INSURANCE IN THE AMOUNT OF \$1,000,000 IS REQUIRED FOR ALL PARK RENTALS \*\***

### Waiver and Release

Applicant, on behalf of itself and applicant's officers, directors, members, managers, partners, employees, agents, contractors, representatives, guests, invitees, and participants (collectively, "Applicant"), waives and releases the City of Hughson, its Council members, officers, employees, agents, contractors, and other representatives (collectively, "City"), from any and all liability, demands, claims, costs, losses, damages, recoveries, settlements, and expenses (including interest, penalties, attorney fees, accounting fees, and expert witness fees) incurred by City (collectively, "Losses"), known or unknown, contingent or otherwise, directly or indirectly arising from or related to the event(s) or activity/ies described in this Form, except where the Losses are caused by the sole negligence or willful misconduct of City. Applicant understands this release includes claims or causes of action that may be unknown by Applicant, and Applicant assumes this risk. Further, Applicant will indemnify, defend, and hold harmless City against all Losses, known or unknown, contingent or otherwise, directly or indirectly arising from or related to the event(s) or activity/ies described in this Form, except where the Losses are caused by the sole negligence or willful misconduct of City. Losses includes, without limitation, claims or causes of action or damages relating to infection of any person or animal by COVID-19 or other disease that occurs, or is alleged to occur, during or related to the event(s) described in this Form .

I declare I am the Applicant, or a representative of Applicant duly authorized to submit this Form, and the information provided in this Form is true and correct to the best of my knowledge. I understand and agree City's authorization, if given, of Applicant's use of LeBright Field may be withheld, conditioned, delayed, amended or revoked for any or no reason, with or without notice.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Field (3HRS): \$30/Non-Local \$60	Tournament: \$125/Non-Local \$250	Lights: \$23 Per Hour
Park Deposit: \$100	Concession Stand Deposit: \$100	<b>Total AMT Due:</b> _____ <b>Paid:</b> Y / N