

terms listed above.

CITY USE ONLY: USER ID: \_\_\_\_\_ RENTAL #: \_\_\_\_\_

## **INDOOR FACILITY USE REQUEST FORM**

parks.bellevuewa.gov/rentals/

UPDATED 12/22/22

The state of the s	
ORGANIZATION:	TODAY'S DATE:
PRIMARY CONTACT NAME:	NON-PROFIT ID#:
EMAIL:	CELL PHONE:
ADDRESS:	WORK PHONE:
CITY:	HOME PHONE:
STATE: ZIP:	
ALTERNATE CONTACT NAME:	CELL PHONE:
EMAIL:	
NAME OF FACILITY:	
DATE(S) REQUESTED (Attach separate sheet if needed):	
TIME REQUESTED (Must include setup & cleanup time):	
TYPE OF ACTIVITY/USE:	
EVENT TIME (Guest arrival and departure):	то
<b>IS THE EVENT?</b> Private (have a guest list, know who is attended)	ding or limited to a set number of people) <b>OR</b>
Public (public is invited through word-of-mou	uth, flyers, or media advertising)
ANTICIPATED MAXIMUM ATTENDANCE? Total F	BY AGE GROUP: Adults Youth
AGREEMEN The undersigned hereby makes application to City of Bellevue for use above and certifies that the information given in the application mater has the authority to make this application for the applicant and agrees policies and procedures of the City of Bellevue and Parks & Communit responsibility for the conduct of their guests and/or contractors associe exercise the utmost care in the use of the premises and property and the resulting from the use of said facilities. The applicant further agrees to from the applicant's use of said facilities. The applicant signing this agree of damage, theft, or disturbances during the rental period. The applicate requirements and guidelines as issued by the Governor's Office, Depote to comply with all applicable COVID-19 safety requirements and guidelines as well as all applicable COVID-19 safety requirements and guidelines as well as all applicable COVID-19 safety requirements and conditions may result in termination.  I have read, understood, and agree to comply with all procedures in Supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting to use the supplemental Form documents for the facility I am requesting the supplemental Form documents for the supplemental Form documents for the	of the Parks & Community Services facility described rials is correct. The undersigned further states that he/she is that the applicant will observe the rules, regulations, by Services Department. The applicant assumes stated with or attending the event. The applicant agrees to to hold the City of Bellevue harmless from all liability or reimburse the City of Bellevue for any damage arising rement will be considered the responsible party in case ant agrees to comply with all applicable COVID-19 safety partment of Health, or other state or local authority, and delines identified by the City or set out in any relevant for contractors associated with or attending the event direments and guidelines. The applicant understands that or suspension of rental.
SIGNATURE (REQUIRED): Primary Contact:	Date:
In lieu of my signature, I certify that I have an account with Bellevue  ID# I am ackn	