

SPECIAL EVENT PERMIT

INSTRUCTIONS: To apply for a Special Event Permit, complete this form and read the Special Event Permit Terms and Conditions attached.

FORMS CAN BE EMAILED TO dkopler@parks.ca.gov

APPLICANT/ORGANIZATION		
ADDRESS		CITY/STATE/ZIP CODE
CONTACT PERSON	BUSINESS PHONE ()	HOME PHONE ()
PARK UNIT	LOCATION	
SPECIFIC USE	DATE(S)	HOURS

1. PURPOSE OF THE EVENT:

THIS PERMIT DOES NOT GRANT EXCLUSIVE USE OF A WEDDING SITE. OTHER PARK USERS MAY ACCESS SURROUNDING TRAILS.

2. PARK AREA/FACILITIES TO BE USED:

3. MAXIMUM NUMBER OF PEOPLE EXPECTED TO ATTEND THE EVENT AT ONE TIME AND METHOD FOR LIMITING ATTENDANCE (THE STATE MAY LIMIT THE MAXIMUM ATTENDANCE WITHIN ITS DISCRETION):

80

4. PLEASE ANSWER THE FOLLOWING QUESTIONS:

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	Does the event involve the sale or use of alcoholic beverages?
<input type="checkbox"/>	<input type="checkbox"/>	Will additional fees be charged for participants (beyond regular facility fees)?
<input type="checkbox"/>	<input type="checkbox"/>	Will items or services be sold at the event?
<input type="checkbox"/>	<input type="checkbox"/>	Are there any other special conditions or requirements? (e.g., accessibility - see page 2)

I have read and accept the Special Event Terms and Conditions attached. I understand that the District Superintendent or authorized representative may terminate without prior notice any special event activity when it is necessary for the safety and enjoyment of the public, for the protection of the resources, or for violation of any rules or regulations of the Department of Parks and Recreation or conditions of this permit. I also understand that any Special Event Permit may be cancelled without notice in the event of disaster or unforeseen emergency.

SIGNATURE

DATE



FOR DEPARTMENT COMPLETION ONLY		<i>Department of General Services Use Only</i>
TOTAL PERMIT FEES	COMMENTS	
REVIEWED AND RECOMMENDED BY	DATE	
TITLE	BUSINESS PHONE ()	
ADDRESS	CITY/STATE/ZIP CODE	
APPROVED BY	DATE	
TITLE	BUSINESS PHONE ()	
ADDRESS	CITY/STATE/ZIP CODE	
DIRECTOR APPROVAL (for alcoholic beverage sale of more than 4 days only)	DATE	