

**PRIVATE SPONSORED
BEACH CLEAN UP RESERVATION REQUEST**

INSTRUCTIONS: Read the Beach Clean-up Guidelines and complete this form in its entirety to apply for a PRIVATE Beach Clean-Up Reservation.

THIS REQUEST MUST BE ACCOMPANIED BY ONE OF THE FOLLOWING RELEASE FORMS:

- *Volunteer Group Services Agreement* (for self-insured volunteer group.) Form 208B
*Must also provide a proof of accident insurance for each of its participants, provide a roster of all participants, and the group agrees to assume all responsibilities for juveniles.
- *Parental/Guardian Permission Form* (for juvenile volunteers, one for each child or sibling of same family) Form 208C
- *Special Project or Activity Sign-In* (for volunteers over 18 in non-insured groups) Form 208G

REQUEST MUST HAVE CREDIT CARD AUTHORIZATION FORM

*We no longer accept checks of any kind.

* Reservations must be made 15 days in advance of the proposed date of your visit to allow preparation and scheduling by park personnel
Once this form has been approved, it will be returned to you and will serve as your record of the confirmed reservation and your group's admission to the park.

Please fax all requests to 714-377-8681 or email to Elizabeth.Bailey@parks.ca.gov

Location requested: **Huntington State Beach** _____ or **Bolsa Chica State Beach** _____

Proposed Day & Date of Beach Clean-up: _____

Name of Group/Individual To Thank: _____

Time of Arrival: _____ Departure: _____

Person in Charge: _____

Estimated Number of Vehicles in group: _____

Address: _____

Buses: _____ Cars: _____

Age/Grade of Children _____

Email: _____

No. of Children: _____ Adults: _____

Must have contact/cell phone: _____

Additional Activity details: _____

Will this event be open for the public to attend? _____

Will the event be marketed, promoted, or advertised in any manner? *If yes, please provide method of advertisement and copies of flyers, posters, etc. _____

Are you an entity being paid to organize a clean-up for an outside group? If yes, list the name of the group and please attach an invoice. _____

List all organizations/third parties involved. (ex: sponsors, party rentals, caterers, promotional firms, etc.) Please attach copies of estimates and invoices. _____

Will items or services be sold at the event? If yes, please list items or services to be sold. _____

Will the event include food concession and/or preparation areas? _____

Will there be amplified sound associated with the event? _____

Will the event have any temporary structures including canopies, tents, fencing, etc. erected during the event?
*If yes, please attach a detailed site map of your proposed event lay-out. _____

Will the event involve any type of aquatic activity? *If yes, applicant will be required to hire California State Park Lifeguard services at cost. _____

Will you need clean-up materials such as bags & gloves? _____

Do your volunteers need a program given in Spanish? _____

Do your volunteers require a sand wheelchair? _____

Please list fee/donation amount:

CERTIFICATION

The above described visit is an official Private Sponsored Beach Clean-Up Reservation.

All waivers/permissions and forms are signed and attached.

I have read and accept the Beach Clean-Up Guidelines attached.

I understand that the District Superintendent or authorized representative may terminate, without prior notice, any beach clean-up 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 Beach Clean-Up Permit may be cancelled without notice in the event of disaster or unforeseen emergency.

This is a donation of this group/individual's time, effort, and money to go toward the Huntington and Bolsa Chica Interpretive Account.

Fax #: _____ Signed: _____
Individual/Group Leader *Date*

FOR PARK USE ONLY

____ We are pleased to confirm your Group Activity on _____, _____ at _____
Day *Date* *Time*

____ We regret that the time you requested for a group visit is not available.

COMMENTS: _____

Approved by *Title* *Date*

FOR PARK USE ONLY (USE BLUE INK)

Date Received:

Date Approved:

Approved By:

STAFF

- Placed on OCN SPA calendar
- Maintenance staff notified *List RR needed to be opened
- Ranger/Lifeguard notified
- Kiosk notified_____

DONATION

- paid

ADDITIONAL NOTES