



# City of Manhattan Beach

## Parks & Recreation

This application must be submitted 10 business days prior to event. Applications are accepted for indoor and outdoor facilities a maximum of six (6) months in advance for residents and two (2) months in advance for nonresidents. Return completed application to: Parks and Recreation Department 1400 Highland Ave., Manhattan Beach, CA 90266 Fax: (310) 802-5401 Email: [reservations@citymb.info](mailto:reservations@citymb.info)

Applicant Information			
Applicant Name		Organization Name	
Street Address		City	State
Zip Code			
Primary Phone	Alternative Phone	Email	
Reservation Information			
Facility/Park		Room/Area	Date
Open to the Public: <input type="checkbox"/> Yes <input type="checkbox"/> No		Start (Include setup time)	
Entry Fee: <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> AM <input type="checkbox"/> PM	
Marketing Material: <input type="checkbox"/> Yes <input type="checkbox"/> No		End (Include cleanup time)	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	
Event Information			
Event Type (if birthday party, specify age)		Total Attendance	
Requested Setup (Indoor facilities only): <input type="checkbox"/> Meeting <input type="checkbox"/> Square <input type="checkbox"/> Classroom <input type="checkbox"/> COG <input type="checkbox"/> U-Shape <input type="checkbox"/> No Setup <input type="checkbox"/> Custom Setup (additional form) Equipment <input type="checkbox"/> Y <input type="checkbox"/> N (If yes, additional form needed)		Will you be using outside services/vendors?*	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		Type: _____	
		Name: _____	
		*Must have Manhattan Beach Business License and Health Permit	
Payment Information (All fees, including deposit, will be processed at time of approval)			
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK: C#			
<input type="checkbox"/> CREDIT CARD: CC# _____ SC: _____ EXP: _____			
Cardholder's Signature: _____ Print: _____			
Applicant Statement			
I, the undersigned, understand all park policies and procedures and general regulations provided to me and will comply with them			
_____ Applicant Signature		_____ Date	

Facility:

Date:

P#:

<b>OFFICE USE ONLY</b> <input type="checkbox"/> Business License <input type="checkbox"/> Insurance <input type="checkbox"/> Security <input type="checkbox"/> Health Permit	FINAL APPROVAL: <input type="checkbox"/> Y <input type="checkbox"/> N  Signature: _____  Date: _____
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