CITY AND COUNTY OF BROOMFIELD
PARKS AND SHELTERS RESERVATION REQUEST

***Please Submit by* SECURE E Fax to: 303-410-3825 or Email to: ParkRental@broomfield.org**

Requests are processed in the order they are received and booked based on availability.
Reservation is not final until you have paid in full and received confirmation from Broomfield Recreation Services.
You will be contacted within 2 business days after receipt. Responsible party must be present at the park for entire event.

Name: _____

Organization: *(if applicable)* _____

Email: _____

Address: _____

City: _____ Zip: _____ County: _____

Phone (day): _____ Phone (eve): _____

Requested Date: _____ **Times:** *(start & end)* _____

Alternative Date: _____ Alt. Times: *(start & end)* _____

Number of People Attending: _____ Age Group: _____

Event Function: _____

Please be specific. (i.e. Wedding, Family Reunion, Birthday Party, Company Picnic, etc.)

(1st choice) Park Shelter: _____

(2nd choice) Park Shelter: _____

Hourly Rate	X # of Hours	Alcohol Permit?	Grand TOTAL

Alcohol Permit

☐ Yes ☐ No

Alcohol Permit needs to be submitted separately. See Additional Attachment.
$12 resident and $20 nonresident non-refundable administrative fee for an Alcohol Permit. Fee will be added to your rental.

The Recreation Services Alcohol Permit does NOT take the place of a Special Events Permit for the sale, by the drink, of alcoholic or fermented malt beverages required by Broomfield Municipal Code and Colorado Revised Statue. Application for a Special Events Permit must be submitted 30 days in advance of the event. For Information about Special Events Permits and whether one is required, please contact the City Clerk's Office at 303-438-6332.

Payment:
(AE, Discover, Visa, MC) _____ Exp. Date: _____

Please Mark: ☐ **Pay 50% Down Payment** **(OR)** ☐ **Pay in FULL now**

☐ *I have read and agree to the terms and conditions of the change/cancellation policy.*

☐ *I understand that the Parks Department will monitor the number of people at my event.*
I will be charged appropriately if my number exceeds my reservation/permit.

Signature: _____ Date: _____

Special Requests: ☐ Athletic Fields (Baseball/Softball/Soccer)-Additional Fees Apply. Fields may not be available.

Please see Parks Rental Agreement for additional information. You May Supply: ☐ Inflatable ☐ Live Music

☐ Water Access- Deposit and/or Water Key may be required. State Reason: _____

Additional Information/Notes – Please explain: _____

For Office Use Only	Date Received-		Walk in/fax/email Location PDRC/BCC	Time:		Staff Initial:	

Revised 2/2/2016