



COMMUNITY CENTER PERMIT APPLICATION

Phone: (541) 994-2131

2150 NE Oar Place, Lincoln City, OR 97367

The City recommends you apply 30 days before you wish to have the exclusive use of a City facility. The City of Lincoln City cannot guarantee applications made less than 14 days before the requested usage. Only complete applications will be accepted.

Application Check List

- 1) Complete and sign the Community Center Permit Application Including:**
 - (a) Contact information
 - (b) Event time arrival and departure
 - (c) Which facility requested
 - (d) Answer yes/no questions
 - (e) Estimated Attendance
 - (f) Application Signature/date of signing
- 2) For clarification of conditions of rental:**
 - (a) please refer to the information at the bottom of the rental fee page and the Agreement and Conditions page.
 - (b) Initial rental fee page in two places.
- 3) Agreements and Conditions Page:**
 - (a) Initial in two places.
- 4) Permits are considered upon receipt of completed application and application fee:**
 - (a) All applications are considered on a first come basis.
 - (i) This is based on receipt of completed permit application and application fee.
- 5) If your rental requires insurance:**
 - (a) Please see the last page of the application for details.
- 6) The \$10 application fee is due at time of application:**
 - (a) The fee can be paid at the Community Center front desk or by calling the desk at 541.994.2131

If the application is denied, you will receive a written explanation for the denial. If you wish to file an appeal of a denial of an exclusive use permit, you will need to file a written notice of appeal with the City Recorder. Your appeal will be heard before the City Council of the City of Lincoln City in accordance with the guidelines set out in Chapter 1.26 (Uniform Administrative Appeals) of the Lincoln City Municipal Code.

COMMUNITY CENTER PERMIT APPLICATION

| | | | | | | | | | | | |
|--|---|---|----------------------|--|---|--|---|---|------------------------------------|--|--|
| Main Contact: | | Phone: | | | | | | | | | |
| Company (if applicable): | | Non-Profit EIN: | | | | | | | | | |
| Address: | | City/State/Zip: | | | | | | | | | |
| Email: | | Fax: | | | | | | | | | |
| Event Description: | | | | | | | | | | | |
| Event Date(s): | | Type: <input type="checkbox"/> One Time <input type="checkbox"/> Ongoing | | | | | | | | | |
| Day: <input type="checkbox"/> Su <input type="checkbox"/> Mo <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> Fr <input type="checkbox"/> Sa | | Repeats: <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Daily | | | | | | | | | |
| Arrival time: _____ am/pm (including Set-up) | | Departure Time _____ am/pm (including Clean-up) | | | | | | | | | |
| FACILITY: | | | | | | | | | | | |
| <input type="checkbox"/> POOL NO SLIDE | | <input type="checkbox"/> ROCK WALL | | | | | | | | | |
| <input type="checkbox"/> POOL WITH SLIDE | | <input type="checkbox"/> GYMNASIUM FULL COURT | | | | | | | | | |
| <input type="checkbox"/> LARGE MULTI-PURPOSE ROOM NO KITCHEN | | <input type="checkbox"/> GYMNASIUM HALF COURT | | | | | | | | | |
| <input type="checkbox"/> LARGE MULTI-PURPOSE ROOM WITH KITCHEN | | <input type="checkbox"/> WEST WING MEETING ROOMS | | | | | | | | | |
| <input type="checkbox"/> SMALL CONFERENCE ROOM | | <input type="checkbox"/> WEST WING MEETING ROOMS WITH KITCHEN | | | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Yes No</td> <td style="width: 50%; border: none;">Yes No</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> <input type="checkbox"/> Is this event open to the public?</td> <td style="border: none;"><input type="checkbox"/> <input type="checkbox"/> Will admission be charged or items sold?</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> <input type="checkbox"/> Will Alcohol be served?</td> <td style="border: none;"><input type="checkbox"/> <input type="checkbox"/> Will there be amplified Sound?</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> <input type="checkbox"/> Will there be 50 or more participants?</td> <td style="border: none;">Estimated Attendance: _____</td> </tr> </table> | | Yes No | Yes No | <input type="checkbox"/> <input type="checkbox"/> Is this event open to the public? | <input type="checkbox"/> <input type="checkbox"/> Will admission be charged or items sold? | <input type="checkbox"/> <input type="checkbox"/> Will Alcohol be served? | <input type="checkbox"/> <input type="checkbox"/> Will there be amplified Sound? | <input type="checkbox"/> <input type="checkbox"/> Will there be 50 or more participants? | Estimated Attendance: _____ | If yes to any of the above questions, a Special Event Permit and/or insurance will be required. | |
| Yes No | Yes No | | | | | | | | | | |
| <input type="checkbox"/> <input type="checkbox"/> Is this event open to the public? | <input type="checkbox"/> <input type="checkbox"/> Will admission be charged or items sold? | | | | | | | | | | |
| <input type="checkbox"/> <input type="checkbox"/> Will Alcohol be served? | <input type="checkbox"/> <input type="checkbox"/> Will there be amplified Sound? | | | | | | | | | | |
| <input type="checkbox"/> <input type="checkbox"/> Will there be 50 or more participants? | Estimated Attendance: _____ | | | | | | | | | | |
| <p style="color: red; font-weight: bold; margin: 0;">A \$10 non-refundable application fee is due at time of application.</p> <p style="font-weight: bold; margin: 0;">Please Note: Reservations should be made a minimum of 14 days in advance and are approved upon confirmation and after:</p> <ul style="list-style-type: none"> A completed Permit Application has been submitted and payment has been made. When using the kitchen, a Cleaning Deposit must be paid to approve the booking. Event insurance is required for all pool rentals and permits with more than 50 participants. | | | | | | | | | | | |
| Applicant Signature: _____ | | Date: _____ | | | | | | | | | |
| FOR STAFF USE ONLY | | | | | | | | | | | |
| Date Submitted: _____ | | Permit Number #: _____ Expires: _____ | | | | | | | | | |
| <input type="checkbox"/> Application Fee Received # | | Confirm | | | | | | | | | |
| <input type="checkbox"/> If Applicable Deposit Received | | Staff _____ Date: _____ | | | | | | | | | |
| <input type="checkbox"/> Reserved in ActiveNet (tentative) | | Staff _____ Date: _____ | | | | | | | | | |
| <input type="checkbox"/> If Insurance Required, Certificate Received | | Staff _____ Date: _____ | | | | | | | | | |
| <input type="checkbox"/> Management Approved | | Staff _____ Date: _____ | | | | | | | | | |
| <input type="checkbox"/> Rental Fees Paid \$ _____ | | Staff _____ Date: _____ | | | | | | | | | |
| <input type="checkbox"/> Approved in ActiveNet | | Supervisor _____ Date: _____ | | | | | | | | | |
| <input type="checkbox"/> Permit Receipt emailed | | Staff _____ Date: _____ | | | | | | | | | |
| <input type="checkbox"/> Permit Completed Moved to Complete Folder | | | | | | | | | | | |

Return form to: Lincoln City Parks & Recreation

2150 NE Oar Place, Lincoln City, OR 97367

Contact: Email: ccfrontdesk@lincolncity.org Phone: (541) 994-2131

| FACILITY | NON-PROFIT PER HOUR/DAY | PRIVATE PER HOUR | COMMERCIAL PER HOUR |
|--|-------------------------|------------------|---------------------|
| Multi-purpose room (approx. 2,500 sq. ft.) | \$21 | \$26 | \$40 |
| Multi-purpose room with kitchen (no oven or range) | \$28 | \$36 | \$54 |
| Small meeting room (340 sq. ft.) | \$15 | \$22 | \$32 |
| Basketball Gym Full Court | \$58/\$281 Day | \$67/\$312 Day | \$99/\$375 Day |
| Basketball Gym Half Court | \$29 | \$33.50 | \$49.50 |
| Basketball Gym Floor Covering Use | \$200 | \$200 | \$200 |
| West Wing meeting rooms | \$21 | \$26 | \$40 |
| West Wing meeting rooms with kitchen | \$28 | \$36 | \$54 |

| | REGULAR RATE PER HOUR | RESIDENT DISCOUNT PER HOUR |
|-----------|-----------------------|----------------------------|
| Rock Wall | \$50 | \$41 |

| POOL: Event insurance is required for all pool rentals | PER HOUR | ADD THE SLIDE PER HOUR |
|--|----------|------------------------|
| 1-25 swimmers | \$91 | \$40 |
| 26-50 swimmers | \$116 | \$40 |
| For each additional swimmers | \$25 | \$40 |

| ADDITIONAL FEES | RATE |
|--|-----------|
| Rentals out of regular business hours | \$38/hour |
| Refundable deposit for rentals with more than 50 participants. | \$54 |
| Refundable deposit for Kitchen rentals | \$60 |

Rentals are subject to a two-hour minimum.

- To receive a full refund, cancellations must be received at least 14 days prior to your booking.
- Set-up and clean-up must take place during your paid rental time.
 - Extra fees will be charged for late stays, early entries, damage, and/or failure to clean-up.
 - A check list will be provided for the close of rentals.
 - Extra time is rounded up in 15 minute increments and will be charged to the renter.
- Rental of spaces are only for the rented space. Any use of the Community Center is separate and drop-in fees/membership fees apply. Payment must be made before usage.
 - A room rental during an activity does not guarantee space in the pool/gym. Please Initial _____
- Event Insurance is required for all pool rentals and for all permits with 50 or more participants.
 - Please see the insurance page for details.
- The following are not permitted: Please initial _____
 - Temporary structures such as bounce houses.
 - Grills or other cooking devices.
 - Crock pots/slow cookers are permitted.
 - Glitter, confetti, or open flames.
 - Decorations, piñatas or items that need to be suspended or attached to the wall or ceiling.
- No charge rentals:
 - Thank you for partnering with us for your event. In exchange for a no charge rental permit, we require that Lincoln City Parks & Recreation be recognized in any advertising for the event, utilizing our logo. A copy of our logo is available upon request.

AGREEMENTS AND CONDITIONS - Please sign and return this page.

1. Applicant, its agents, and employees shall comply with all applicable federal, state, county, and municipal laws while engaged in the above activity.
2. Applicant, its agents, and employees agree to abide by the established regulations relating to facility use, and agree to keep the facility in a clean and orderly condition.
3. Applicant, its agents, and employees agree to obtain any and all other required permits or authorizations from the City or other agencies before the activity takes place.
4. Applicant will comply with any conditions imposed by the City on the Exclusive Use Permit.
5. Applicant agrees to display, or have readily available, the Exclusive Use Permit issued by the City while the authorized activity is taking place.
6. Applicant agrees to clean up all garbage, refuse, and other debris resulting from applicant's use of the designated facility. You must carry out garbage exceeding capacity of available trash cans.
7. Applicant is responsible for any damages to the facility caused by Applicant's use. Applicant acknowledges and accepts they will be billed for time and materials if the facility is not left in the condition in which it was found. **Please Initial:** _____
8. The applicant agrees to hold harmless, indemnify, and defend the City of Lincoln City, its officers, agents, and employees from any and all liability, actions, claims, losses, damages, or other costs including attorney fees and witness costs (at both trial and appeal level, whether or not a trial or appeal ever takes place) that may be asserted by any person or entity arising from, during, or in connection with the Applicant's activities, except liability arising out of the sole negligence of the City and its employees. Such indemnification shall also cover claims brought against City under state or federal workers' compensation laws. If any aspect of this indemnity shall be found to be illegal or invalid for any reason whatsoever, such illegality or invalidity shall not affect the validity of the remainder of this indemnification.
9. It is understood that the organization, group, or individual is adequately insured for the nature and duration of the activity to be undertaken, and that proof of insurance will be provided to the Parks & Recreation Department, when required.
10. Any and all structural changes to City buildings or City property by applicant shall be approved in advance by the City Manager.
11. Any personal property of Applicant kept in or at the facility is at Applicant's own risk. The City of Lincoln City accepts no responsibility for the security of Applicant's personal property.
12. This permit may be revoked at any time, upon notice to applicant, its agent, or employees, for noncompliance with the terms or conditions of this permit or for the preservation of the public peace, health, safety, or general welfare.
13. The City is not able to provide assistance in moving tables and chairs to accommodate your event. If you choose to move tables or your guest(s) choose to move tables, they do so at their own risk.
14. Do not drive on or park vehicles on park grounds except in designated parking areas.
15. Remove and dispose of any signs (e.g. directional) used for your event, including any materials used to secure signs.
16. Permits are not transferable unless written consent is given by the City Manager or their designee. Facilities cannot be "loaned out" to other organizations during the times you have reserved them. The Group/Organization named on the permit is the only one authorized for use during the permit period. If you are sharing the facility with another organization, both names need to be listed on the permit.
17. There will not be refunds for cancellations within 14 days of the date of your permit.

Please sign and return this page.

By my initials, I declare that _____
I understand the terms listed above: _____



City of Lincoln City

Phone: (541) 994-2131
2150 NE Oar Place, Lincoln City, OR 97367

IMPORTANT INFORMATION REGARDING CERTIFICATES OF LIABILITY (INSURANCE) FOR EVENTS HELD IN/ON CITY OF LINCOLN CITY PROPERTY

If your Exclusive Use Permit states that insurance is required, please obtain insurance as detailed below.

Certificates must name the City of Lincoln City as an “additional insured: for \$1 million and \$2 million and must also name the date, time and location of the event for which the insurance is valid. The designation of the City of Lincoln City as the “certificate holder” will not be accepted unless it is also clearly indicated elsewhere on the certificate that the City is an additional insured.

The designation of the City of Lincoln City and information regarding time and location must be clearly stated somewhere on the certificate. If the City is being named as the “certificate holder,” please also be sure that the phrase “certificate holder is named as additional insured,” appears on the certificate.

City of Lincoln City its officers and employees
PO Box 50
Lincoln City, OR 97367

Certificates that do not meet this requirement will not be accepted as proof of liability for an event.