

Southside Oroville Community Center

(530) 693-4305, FAX (530) 693-4605

APPLICATION FOR USE OF FACILITY

Organization/Group _____ Date _____

Contact Name: _____ Title _____

Address: _____ City: _____ State _____ Zip _____

Telephone: _____ Cell Phone _____ Fax _____

Email Address: _____

FACILITIES TO BE USED: Multipurpose Room Conference Room Kitchen Grounds Parking Lot

ADDITIONAL NEEDS: Tables Chairs Stage Podium Microphone Video

DAY/DATE REQUESTED: including set up and take down time.

Event: Date _____ From: _____ To _____

Event type: _____

Anticipated Number Attending Event: _____

FACILITY REQUIREMENTS:

HOURS-BUILDING: Sunday–Thursday: Function must end by 11pm with clean-up completed by 12pm;

Friday & Saturday: Function must end by 1am with clean-up completed by 2am

GROUNDS: Daily: Outside activities are limited to the hours between 6am and 10pm

SMOKING - ABSOLUTELY NO SMOKING ALLOWED INSIDE THE SOUTHSIDE OROVILLE COMMUNITY CENTER, NOR WITHIN 20 FEET OF A MAIN EXIT, ENTRANCE OR OPERABLE WINDOW. (AB 846)

ALCOHOLIC BEVERAGES -

1. SECURITY GUARDS may be REQUIRED if selling or serving alcoholic beverages.
2. If required Renter shall provide a copy of the paid SECURITY AGREEMENT prior to event.
3. If required Security guards are required ½-hour prior to event and must remain until the end of the event.
4. All alcoholic beverages served or sold MUST REMAIN ON PREMISES.
5. Alcoholic beverages shall not be served, sold or consumed by anyone UNDER THE AGE OF 21 on the premises.
6. Use of alcoholic beverages on the premises must be IN COMPLIANCE WITH THE REGULATIONS OF THE STATE OF CALIFORNIA DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL.

Requested By: _____ **DATE:** _____
(Must be 21 years of age or older)

SOCC may require an original signature on an application at any point during the process. Upon completion, submit this application by e-mail, mail, fax or hand deliver to:

Southside Oroville Community Center
2959 Lower Wyandotte Rd
Oroville, CA 95965
PHONE (530) 693-4305
FAX (530) 693-4605
EMAIL:
OSCIASOCC@OUTLOOK.COM

APPLICANT GUARANTEES THAT ALL INFORMATION PROVIDED HEREIN IS A TRUE AND CORRECT REPRESENTATION OF THE INTENDED EVENT. FALSIFICATION OF ANY DISCLOSURE FOR THE PURPOSE OF AVOIDING THE HIRING OF SECURITY PERSONNEL, MANIPULATING THE COSTS OF RENTAL FEES OR DEPOSITS OR CIRCUMVENTING ANY OF THE OTHER REQUIREMENTS OF THE RENTAL AGREEMENT SHALL RENDER THIS APPLICATION AND ANY SUBSEQUENT RENTAL AGREEMENT VOID WITH FORFEITURE OF ANY PORTION OF THE SECURITY DEPOSIT AS DEEMED NECESSARY. IN THE EVENT THAT THE SECURITY DEPOSIT IS NOT RECEIVED FROM APPLICANT WITHIN SEVENTY-TWO (72) HOURS OF NOTIFICATION OF APPROVAL TO RENT, APPROVAL MAY BE RESCINDED AND THE PREMISES MAY BE RENTED TO ANOTHER PARTY.