

OLIVEHURST PUBLIC UTILITY DISTRICT

Business Office 1970 9TH Avenue/P.O. Box 670 Olivehurst, CA 95961

Phone (530) 743-4657 Fax (530) 743-3023 www.opud.org

Application must be submitted to Business Office a minimum of 3 business days prior to date of use.

Permit # _____

Park Table Reservation Form

(YOU MUST HAVE YOUR COPY OF RESERVATION PACKET IN POSSESSION DURING USE)
No reservation is finalized until the fees are paid. Once paid, the reservation fee is NON-REFUNDABLE.

I,	, representing	
(Name of Individual/Representative)	, representing	(Organization, if applicable)
hereby request to reserve	tables. Date:	Time:
(See Park Table Reservati	on Policy for the number of tables and l	nours available for reservations)
at the following facility:	Pa	ark (Eufay Wood Sr. Memorial Park,
Veterans Park, Lindhurst Memorial Pa	rk, or Richard "Doug" Donahue	e Park)
Type of event(Company picnic, family picnic, fur	d raiser, birthday party, etc.)	
Will there be an admission charge, sale	e, solicitation, donation, or colle	ection involved with your use?
Will other equipment be used (i.e., sou	and equipment, stage, speaker(s)	, jump house, dunk tank, etc.)?
(A Park Use P	Permit will also be required if you answe	red ves to the above)
No reservation is finalized until the fees are	e paid. Once paid, the reservation f	ee is NON-REFUNDABLE . INITIAL HERE
The "responsible party" listed on the "Partules as posted. INITIAL HERE		sure that he/she and any guests abide by all park
The "responsible party" will be responsibl table clothes, balloons, signs, etc. INITIAL HE	<u> </u>	around reserved tables. This includes removal o
Any change, alteration or modification of intended reservation. Any misrepresentation of your group NITIAL HERE	use must be approved by Olivehurst Por use, or failure to comply with Park	ublic Utility District. Change can result in cancellation of Use Guidelines may result in expulsion from the park.
PUBLIC UTILITY DISTRICT, ITS OFFICERS, AGEN	TS, EMPLOYEES AND VOLUNTEERS FF ET UP BECAUSE OF DAMAGES TO PRO	ALL SAVE, KEEP AND HOLD HARMLESS OLIVEHURST ROM ALL DAMAGES, COSTS OR EXPENSES IN LAW OR DPERTY OR PERSONAL INJURY RECEIVED BY REASON
R LOSS SUSTAINED TO THE GROUNDS, BUILDI	NG, OR EQUIPMENT OCCURRING, OR	ANIZATION WILL BE RESPONSIBLE FOR ANY DAMAGE UNUSUAL CLEAN-UP REQUIRED, AS A RESULT OF MY .OWED ARE ON PARK GRASS AREAS AS GRASS AND
Print Name	California D.L. #	
		Hm #
		Fax #
	City/Zip	
I have read the attached Yuba County (Recreation Areas. INITIAL HERE	Ordinance Code Title VIII, Chap	
Signature of Individual/Representative		
FOR OFFICIAL USE ONLY: Reservation	Fee \$	Cash Check #
Issued Packet with Reservation Form, Res	ervation Policy, Yuba County Ordin	nance, Map, and Table Signs
Table Numbers Reserved	Date and Time of R	eservation
Processed by:		Date: