

Pollock Pines-Camino Community Center Rental Application

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facilities@pollockpinesca.org

Date of Event: _____	# of Hours requested: _____	Door Code #: _____
Set-Up Time: _____	Vacating Time: _____	Room # Requested: _____
Type of Event: _____		
Number of People Attending: _____		
Event Open to Public (Y/N): _____		

Application Date: _____		
Applicant Name: _____		
Group or Organization: _____		
Mailing Address: _____		
City: _____	State: _____	Zip: _____
Home Phone: _____		Work Phone: _____
Email: _____		

Anyone who rents from the PPCCCA, needs to provide and name the PPCCCA as additional insured on their policy in regards to the purpose for which they are using the facility. They need no less than a current policy of 1 (one) million occurrent limit and 2 (two) million aggregate limit.

(Proof of Insurance is to be attached to this form) _____
Date received: _____

Alcohol To Be Served: ☐ Yes ☐ No
(A Liquor License is required if a public event)

PPCCCA to run bar and responsible for liquor license? ☐ Yes ☒ No

Special Notes: _____

FEE SUMMARY		
Room #1 Fees:		
\$ 45 Per Hr.		
\$425 for daily rate		
Kitchen Included	_____	
Room #2 Fees:		
\$ 45 Per Hr.		
\$425 for daily rate		
Kitchen Included	_____	
Room #1 & #2:		
\$795 for daily rate		
Kitchen Included	_____	
Room #3 Fees:		
\$ 40 Per Hr.		
\$150 for daily rate		
Room #4 Fees:		
\$ 50 Per Hr.		
\$175 for daily rate		
Kitchen - \$55/Hr.		
Food Preparation & Serving		

Rental Total		

Cleaning/Security Deposit		\$ 500.00
Deposit Paid	Date _____	Check# _____
Rent Paid	Date _____	Check# _____
(must be paid 15 days prior to event)		

Applicant Signature: _____	Date: _____
PPCCCA Representative: _____	- Facility Coordinator Date: _____

PPCCCA

Mailing Address: P.O. Box 1195 - Pollock Pines, CA 95726

(530)647-8005

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