

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: <input type="radio"/> Yes <input type="radio"/> No (A Liquor License is required if a public event)
PPCCCA to run bar and responsible for liquor license? <input type="radio"/> Yes <input checked="" type="radio"/> No

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		0
Cleaning/Security Deposit		\$ 500.00
Deposit Paid	Date _____	Check# _____
Rent Paid	Date _____	Check# _____
(must be paid 15 days prior to event)	_____	_____

Special Notes: _____

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