

# APPLICATION FOR FACILITY RENTAL

WATER CONSERVATION GARDEN  
12122 CUYAMACA COLLEGE DRIVE W., EL CAJON, CA 92019

Please return to:

[Events@thegarden.org](mailto:Events@thegarden.org)

[www.thegarden.org](http://www.thegarden.org)

<b>Event Name:</b>	<b>Date of Event:</b>
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**Individual Requesting Facility Rental:**

<b>Email:</b>	<b>Telephone:</b>
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**ORGANIZATION Requesting Facility Rental:**

<b>Email:</b>	<b>Telephone:</b>
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**Applicant Address, City, State Zip**

<b>Event Run Time:</b>	<b>Rental Space:</b>
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<b>Breakdown Hour</b>	<b>Security Hours Needed:</b>	<b>Expected Attendance:</b>
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### STATEMENT OF INFORMATION AND CONDITIONS

Applicant hereby agrees to the Facility Use Agreement Policies and has signed the attached "Release and Waiver of Liability and Indemnity Agreement" & Event Contract.

The undersigned, in use of the Garden premises, hereby agrees to observe and obey all applicable laws of this state and the rules and regulations of the Friends of the Water Conservation Board including but not limited to the information in the Contract of this application.

**TERMS: Fees are payable in advance of use of facilities, if applicable. Groups using facilities over an extended period of time shall pay monthly in advance.**

**CONFIRMATION COPY WILL BE RETURNED TO YOU AFTER APPROVAL**

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

PRINT NAME OF APPLICANT \_\_\_\_\_

TITLE \_\_\_\_\_

### TO BE COMPLETED BY THE WATER CONSERVATION GARDEN

**FACILITY USE FEE: \$ \_\_\_\_\_ APPROVED**

**BY:**

**DATE**

**POST EVENT  
Damages Deposit Release**

**AMOUNT REFUNDED: \$ \_\_\_\_\_ WCG STAFF INITIALS:**

**DATE:**

**Events**

**Facilities**