



**CITY OF PORT HUENEME  
DEPARTMENT OF RECREATION AND COMMUNITY SERVICES  
ORVENE S. CARPENTER COMMUNITY CENTER, 550 PARK AVENUE  
PORT HUENEME, CA 93041 - TELEPHONE [805] 986-6542**

**APPLICATION FOR RESERVATION**

Name of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone [Day] \_\_\_\_\_ [Evening] \_\_\_\_\_

Applicant is:  Individual  Non-profit 501[c] 3  
 Other [explain] \_\_\_\_\_

Area[s] of facility to be reserved: \_\_\_\_\_

DAY [S]	DATE [S]	TIME - IN	TIME - OUT	TOTAL HOURS	TYPE OF ACTIVITY

Name / Purpose of Event \_\_\_\_\_

Participation / Attendance:  Invitation Only  Public Admission  
 Estimated Attendance:  Organization Only  Yes  No Price \$ \_\_\_\_\_

Permit requested to conduct:  Fund-raising Activity  
 Alcohol Served  Alcohol Sold: Caterer/Service \_\_\_\_\_

\_\_\_\_\_  
 Name of Person Who will Sign Contract \_\_\_\_\_ Telephone \_\_\_\_\_

\_\_\_\_\_  
 Person In Charge of Event, If Different From Above \_\_\_\_\_ Telephone \_\_\_\_\_

I UNDERSTAND THIS IS AN APPLICATION FOR RESERVATION OF SPACE ONLY, AND IS NOT A CONTRACTUAL AGREEMENT. The City of Port Hueneme may or may not approve the request for reservation set forth above. Applicants may be required to submit Articles of Incorporation, Constitution/By-Laws, Financial Statements and /or Proof of Nonprofit Status with the IRS.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION NOT ACCEPTED WITHOUT APPLICATION FEE**

For Office Use Only			
Date Rec'd.	_____	Time _____	RECEIVED BY: _____
App Fee	\$ _____	Date Pd. _____	Receipt # _____
Deposit	\$ _____	Date Pd. _____	Receipt # _____
Fees	\$ _____	Date Pd. _____	Receipt # _____
Fees	\$ _____	Date Pd. _____	Receipt # _____
Fees	\$ _____	Date Pd. _____	Receipt # _____
Fees	\$ _____	Date Pd. _____	Receipt # _____