



**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 \_\_\_\_\_ E-MAIL \_\_\_\_\_

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: Estimated Attendance \_\_\_\_\_  
 [ ] Invitation Only [ ] Organization Only  
 [ ] Public Admission [ ] 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 # _____