

ANAHEIM COMMUNITY SERVICES DEPARTMENT
APPLICATION FOR MULTIPLE USE OF THE EAST ANAHEIM COMMUNITY CENTER

8201 E. Santa Ana Canyon Road, Anaheim, CA 92808
 Phone 1.714.765.3904 Fax 1.714.765.3905

Rental # _____
 Entered by: _____
 Date: _____

Applicant Name: _____
Organization Name: _____
Type of Organization: _____
Mailing Address: _____
City: _____ **Zip Code:** _____
Phone: _____ **Alternate Phone:** _____
Cell Phone: _____ **Fax:** _____
Email: _____
Alternate Contact Name: _____
Phone: _____ **Alternate Phone:** _____
Cell Phone: _____ **Fax:** _____
Email: _____

Room(s) Requested: _____
Type of Event: _____
Estimated Attendance: _____ **Max. Occupancy:** _____
Percentage Anaheim Residents: ____% **(Organizations/Businesses)**
Is the event open to the public? Yes No
Will you be having music or entertainment? Yes No
If yes, please describe: _____
Will alcohol be served? Yes No
Will food be served? Yes No
Will event be professionally catered? Yes No
Name of catering company: _____
Will any goods or services be sold? Yes No
Will event be used as a fundraiser? Yes No
If yes, proceeds will be used for _____

EVENT SCHEDULE (INCLUDE ALL EVENT SET-UP/PREPARATION AND CLEAN UP TIME AS ROOMS WILL BE OPENED AND CLOSED BASED ON TIMES LISTED BELOW)

January Dates: _____ Time: ____ am/pm to ____ am/pm **July Dates:** _____ Time: ____ am/pm to ____ am/pm
February Dates: _____ Time: ____ am/pm to ____ am/pm **August Dates:** _____ Time: ____ am/pm to ____ am/pm
March Dates: _____ Time: ____ am/pm to ____ am/pm **September Dates:** _____ Time: ____ am/pm to ____ am/pm
April Dates: _____ Time: ____ am/pm to ____ am/pm **October Dates:** _____ Time: ____ am/pm to ____ am/pm
May Dates: _____ Time: ____ am/pm to ____ am/pm **November Dates:** _____ Time: ____ am/pm to ____ am/pm
June Dates: _____ Time: ____ am/pm to ____ am/pm **December Dates:** _____ Time: ____ am/pm to ____ am/pm

ROOM SET-UP

- Chairs & Tables: Theatre style to accommodate _____
- Chairs & Tables: Banquet style to accommodate _____
- Chairs & Tables: Classroom style to accommodate _____

EQUIPMENT REQUESTED (BASED UPON AVAILABILITY)

- California Flag Coffee Maker Dry Erase Board Easel-Flip Chart Stand
- Floor Podium Food Warmer Kitchen (No Stove) Microphone
- Microwave Projection Screen Projector Refrigerator/Freezer
- U.S.A. Flag

*** TENANT: PLEASE DO NOT WRITE BELOW THIS LINE ***

SPECIAL CONDITIONS OF AGREEMENT

Tenant to provide: (Initial where applicable)

- Fire Department approved set up diagram and/or applicable permits at least two (2) weeks prior to event: _____
- Set up diagram at least two (2) weeks prior to event: _____
- Public Dance Permit: _____
- General Liability Insurance Certificate & Endorsement 30 days prior to event: _____
- Proof of non-profit status 501© 3 #: _____
- Membership Roster (including city residency): _____

- Off-duty Anaheim Police Officers for event to be arranged by applicant: _____
- Contracted Security Guards, proof required 30 days prior to the event: _____
- Copy of Anaheim Business License: _____
- Copy of ACS Regulations for Use, initiated & signed by tenant: _____
- Copy of ACS Alcohol Regulations signed by tenant: _____
- Copy of any promotional materials: _____
- Other: _____

Approved **Authorized Signature:** _____ **Date:** _____
 Denied **Reason:** _____ **Date:** _____