



Clark County Parks & Recreation Facility and Park Reservation Request Form



Event Name: _____

Name of Organization: _____ **Org. Main Phone #:** _____

Authorized Representative: _____ **Title:** _____

Contact Phone #: _____ **Alternate Contact Phone #:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____ **Email:** _____

Please indicate if any of the following are planned as part of your reservation: **Total #**

<input type="checkbox"/> Sales of any kind	<input type="checkbox"/> Ticket sales or admission fees	<input type="checkbox"/> Fundraising	of participants:
<input type="checkbox"/> Alcohol beverage service	<input type="checkbox"/> Food service or concession stand		_____

Site/Park Name	Location <small>(Address & Cross Streets)</small>	Room #/Area	Day(s)	Time	Date(s)
<i>Sample: Ginko / Sunset Park</i>	<i>2601 E. Sunset Rd Eastern & Sunset</i>	<i>Area G</i>	<i>Saturday</i>	<i>1pm-8:30pm</i>	<i>6/25/2019</i>
Sunset Park	Sunset Park				

Special Dates (No Reservations on Holidays)

Describe Event:

Attach additional sheets as needed

Clark County is required to verify that organizations requiring a Business License or Charitable Registration are in accordance with Clark County Code Chapter 6 are in good standing with the Department of Business License. Please note that permits will not be issued until all information has been received and verified by the Department of Business License which may result in being unable to accommodate your initial request. To expedite, please submit copies of the following documentation with your request for reservation:

- IRS 501 C (if requesting the Community Rate)
- State of NV Incorporation Status
- Clark County Charitable Registration (if requesting the Community Rate)
- Clark County Business License if applicable
- Documentation or Affiliation with State or National Parent Organization if applicable (Listed on form)
- A Certificate of Insurance listing Clark County NV as additionally insured (\$1 million per occurrence, \$2 million aggregate) will be required prior to the issuance of rental permit(s).

Please return completed packet via email to PRSunsetFrontDesk@ClarkCountyNV.Gov or mail to:
Clark County Parks & Recreation
ATTN: Reservation Desk
2601 E. Sunset Road, Las Vegas, NV 89120
(702) 455-8200

For Office Use Only:		
Business License Approval Date: _____	Commercial or Non Profit	Representative & Title: _____
Parks & Recreation Approval Date: _____		Representative & Title: _____



Clark County Parks & Recreation Sunset Park Reservation Form



Type	Yes	No	N/A	Rules/ Instructions
Alcohol Consumption				Alcohol consumption is only allowed by all persons over the age of 21 years old, under the Special Use Permit. This limits the location of the legal consumption of alcohol to under the covered Gazebo area. It is not legal to roam the park with alcohol. NO GLASS CONTAINERS! PLASTIC OR ALUMINUM ONLY! Initials: _____
Amplified Sound Please Circle: Radio, DJ, Band, Instruments, other NO AMPLIFIED SOUND PERMITTED IN THE ASPEN PICNIC AREA				Clark County Ordinance 12.40.020, states that portable sound devices must not be so loud as to be heard from more than 75ft. Initials: _____
Amusement Services/ Bounce House? <i>Please Circle:</i> Bounce House, Clowns, Face Painting, Other NO DUNK TANKS/ WATER EVENTS OR PONY RIDES PERMITTED NO AMUSEMENT SERVICES PERMITTED IN THE FOLLOWING PICNIC AREAS: Cottonwood, Desert Willow, Elm, Hickory, or Indigo				A copy of a one million (\$1,000,000) liability insurance policy with a two million (\$2,000,000) aggregate that lists Clark County and Las Vegas Metropolitan Police Department named as co-insured or additional insured. Proof of insurance must be submitted 30 days prior to the date of your event. If not provided, your event will be cancelled in accordance with our refund policy. *THERE IS NO DRIVING ON THE PARK GROUNDS/GRASS/CEMENTED AREAS, with the exception of parking lot area * No Stakes in the ground for bounce house and like items. Sand bags can be used to hold down. *Amusement Companies must bring their own generator; they are not permitted to use the power pedestals at the park. Initials: _____
Canopies, EZ Up Tents: Please Circle: 10x10 10x20 12x12 20x20				Clark County Fire Dept. Tent permit required for Tents > 200sqft.; Canopy > 400sqft. 702-455-7316 *NO STAKING INTO THE GROUND!! YOU MAY USE SAND/WATER BAGS OR COOLERS Initials: _____
CONCESSIONS, SALE OF ALCOHOL, ADMISSION FEES, ADVERTISEMENT, COMMERCIAL VEHICLES				A written request to the Director of CCPR required for approval, 30 days prior to the event. Permission will only be granted to nonprofit organizations. Additional security may be required. TAM card required. Event CANNOT be open to the public, Special Contract and Business License Required. Initials: _____
Portable Toilets (Contact Park Maintenance for Placement)				Required for groups of 500 and over. Reservation may be declined if receipts are not provided to the Reservation Office 15 days prior to the event. Initials: _____
Trash Removal This is to be marked N/A, trash removal service is not available				Groups who leave excessive trash after their event will be required to pay a \$250 Trash Removal Fee. *ALL TRASH SHOULD BE THROWN AWAY IN THE PROPER RECEPTICALS. IF MORE THAN ONE BAG IS FULL PLEASE DUMP IN DUMPSTER OR PLACE THE TIED UP GARBAGE BAG NEXT TO THE RECEPTICAL. Initials: _____
SECURITY GUARDS * REQUIRED FOR GROUPS OVER 100				Required for groups of 101 or over. Groups must notify the Reservation Office 30 days prior to the event with Security Company name, insurance, business license, and contract with company. Initials: _____



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REFUNDS/ CANCELLATIONS:

All refunds will be issued canceled in person or in writing at least 30 days prior to the reservation date. The General Refund criteria for a Reservation of a picnic area are:

No refunds after the reservation date for a no show.

*** Less than 14 days prior to reservation date: 50%**

*** 14 days prior to the reservation date: 75%**

*** 30 days or more prior to the reservation date: 100%**

The departments 100% satisfaction does not apply to cancellations due to extreme conditions and/or inclement weather.

The person signing this agreement has the authority on behalf of the group to represent and commit to the terms of this agreement under which the group reservation is being made, and to ensure the group's commitment to use the premises in a safe, and lawful manner. The group agrees to assume the risk of using the reserved park area, and hold harmless and indemnify Clark County from and against any and all claims, demands, obligations, causes of action and lawsuits, and all damages, liabilities, fines, judgments, and costs (including reasonable attorney's fees) associated with, arising from or alleged to have risen from the actions or omissions of the group, it's agents, employees or contractors, in connection with the event, or its failure to comply with the laws, ordinances, rules and regulations applicable to its duties and responsibilities set forth herein. We also understand that the group is responsible for repair and/or clean-up costs incurred by Clark County if the reserved area is damaged or vandalized as a result of this reserved use and agree to reimburse Clark County for any such expenses. Clark County reserved the right to revoke this reservation should any information herein be found to be inaccurate or untrue.

Facility User Name (printed): _____ **Date:** _____

Facility User Signature: _____ **Date:** _____

Facility User Driver's License # and State: _____

Clark County Representative: _____ **Date:** _____

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DEPARTMENT OF BUSINESS LICENSE

500 S. Grand Central Parkway
Las Vegas, NV 89155

Please take a few moments to fill out the work sheet and return to Sunset Park
via email: PRSunsetFrontDesk@clarkcountynv.gov, or in person at Sunset Park **by appointment only**.
If you have any questions, please call: 702-455-8200
If any area does not apply, please write "n/a"

Event Name: _____
Business Name: _____

Please provide the dates of the event, the name of the venue, address and phone number:
Event Location: _____
Event Dates: Start Date: _____ End Date: _____

Approximate number of participants each day? _____ Approximate number of spectators? _____
Is your company a charity or a non-profit organization/business? _____ License or certificate # _____

Are you an educational institution, a youth rodeo, a community association or a non-profit community club event? _____

If yes, please supply any unexpired federal 501(c)(3) designation forms.

Please indicate if you are providing services or conducting the following activities:

Sales of any kind? Yes No List the types of sales: _____

Selling tickets or charging Admission fees? Yes No

Issuing prizes, purses, ribbons or the like? Yes No

Will animals be involved in your event? Yes No

Are you hosting or sponsoring an event that is
strictly a horse show? Yes No

Is this considered a rodeo utilizing rough stock? Yes No

Describe your exhibitions, demonstrations, or competitions. _____

Alcoholic beverage service? Yes No

Food Service? Yes No

Is this a school event? Yes No

Is this a fund-raising event? Yes No

If yes, please describe the event and the name of the school: _____

Name & phone number of the representative authorized to make decisions on behalf of the company:

Name: _____

Local phone & Cell #: _____ Fax: _____

Email: _____

Your name & phone # if different than above: _____

I hereby certify and attest that the information provided in this questionnaire is true and accurate to the best of my knowledge.

Applicant

Date

<p>INTERNAL USE ONLY</p> <p>Requirements from the Business License Department</p> <hr style="border: 0; border-top: 1px solid black; margin: 10px 0;"/> <hr style="border: 0; border-top: 1px solid black; margin: 10px 0;"/>
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