



Scott Kennedy Field Policy & Application Packet 2024

❖*For groups and leagues requesting multiple dates*❖

Parks and Recreation
323 Church Street
Santa Cruz, CA 95060
(831) 420-5266 – DC Lawson-Thomas
Dlawson-thomas@cityofsantacruz.com

Published 11-3-23



Scott Kennedy Fields Reservation Instructions for groups and leagues requesting multiple dates

Priority resident application period accepted November 6 through December 8 for the following year. Approval based on **Priority Use** listed in Scott Kennedy Field Use Policy. Beginning December 9, reservations taken on a first come first serve basis for the following year.

To reserve multiple dates at Scott Kennedy Fields submit the following:

- ✓ **Use Application for City Athletic Facilities form** (in packet)
Specify area requested and time including setup and cleanup. Leagues and groups must request a continuous block of time each day. For example: 10am – 12pm and 2pm – 4pm on the same day is not permitted.
- ✓ **General Request Calendar** (in packet)
Groups and Leagues requesting multiple dates over several months need to fill out general request calendars circling dates and specifying the time (include setup & cleanup).
- ✓ **Facility Fees**
See field fee rates and map in packet.
- ✓ **Cleaning & Damage Deposit of \$100**
Refundable
- ✓ **Proof of residency** – Rosters of registrants with home addresses must be presented with reservation request. 55% of registrants must be residents to qualify for resident fee.
- ✓ **Non-profit Authorization form** (in packet)
- ✓ Must be submitted with reservation request.
- ✓ **Field Reservation Agreement** (in packet)
Signed and Dated by permit holder.
- ✓ **Insurance Certificate** (requirements & samples in packet)
Certificate must be approved by the Risk Manager **with an endorsement**.

Scott Kennedy Fields Use Policy

➤ **PRIORITY USE**

1. City of Santa Cruz Parks and Recreation
2. Santa Cruz City Schools
3. Resident Youth Non-Profit (55% residents + non-profit documentation req'd annually)
4. Resident Adult Non-Profit (55% residents + non-profit documentation req'd annually)
5. Resident Use
6. Non-Resident /Non-Profit (non-profit documentation req'd annually)
7. Non-Resident use

➤ **HOURS and OPERATIONS**

1. Field open for public use & reservations from 9am-sunset.
2. Priority resident application period accepted November 6 through December 8 for the following year. Approval based on **Priority Use** criteria listed above.
3. Beginning December 9, reservations will be taken on a first come first serve basis for the following year.
4. Resident non-profit sports programs that are free to children and are not associated with any organized city or county leagues will receive Parks and Recreation priority use #1.
5. Reservations have priority. During non-reserved time, use is limited to 1 hour on half the field.

Scott Kennedy Fields Reservation Fees

FULL FIELD

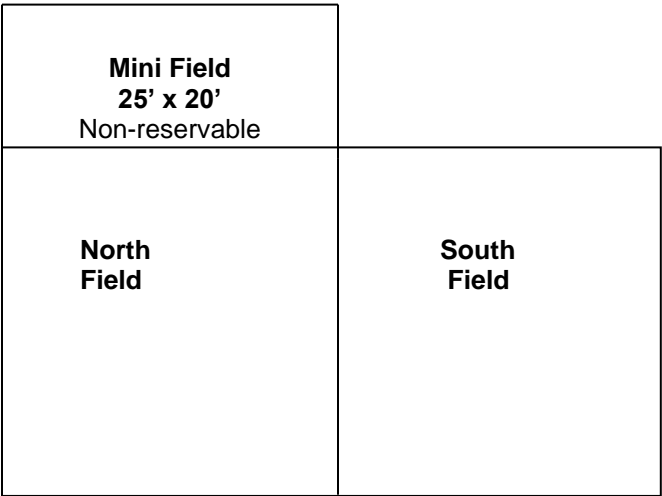
120' X 70'

Youth Non-Profit - \$60/hr.
 Adult Non-Profit -\$82/hr.
 Resident - \$96/hr.
 Non-Resident - \$125/hr.

NORTH or SOUTH FIELD

50' X 70' (half field)

Youth Non-Profit -\$36/hr.
 Adult Non-Profit -\$50/hr.
 Resident - \$59/hr.
 Non-Resident - \$77/hr.



Full Field

Scott Kennedy Field Scheduling

- Fields will be allocated by Priority Use Group Classification.
- Fields will be allocated to groups based on percentage of verifiable total local residents in relation to all teams in that Priority Use Group Classification.

In order to resolve a discrepancy between organizations in the same Priority Use Group Classification, the following allocation formula will be used to determine the amount of field use that will be allocated to each organization.

Fields will be allocated within each Priority Use Group Classification to organizations based on the percentage of verifiable local residents registered with that organization in relation to the total number all registered local residents in all organizations in that Priority Group Classification combined.

Verification of local residency will be established by providing such documentation requested by the City including team rosters, player addresses, picture ID, utility bill, report cards, school ID etc. City reserves the right to conduct random audits to verify residency.

The total number of all local residents registered in all organizations within that Priority Use Group Classification will then be determined. Each organization's local resident number will be divided by the total of all local residents registered to determine the percentage of use to be allocated to each group.

Example:

- Soccer group A has 750 residents
- Soccer group B has 900 residents
- Total local residents registered in both organizations is 1,650
 - 750 divided by 1,650 equals 45%. Group A would receive 45% of the field time available.
 - 900 divided by 1,650 equals 55%. Group B would receive 55% of the field time available.

Definitions:

Priority Use Group 1 – City of Santa Cruz Parks and Recreation: Programs offered by the City of Santa Cruz will have first priority.

Priority Use Group 2 – Santa Cruz City Schools

Priority Use Group 3 - Resident youth non-profit organization: An organization that maintains registrants of at least 55% residents. Organization must provide annual non-profit documentation from the IRS.

Priority Use Group 4 - Resident, adult, non-profit organizations: An organization that maintains registrants of at least 55% residents. Organization must provide annual non-profit documentation from the IRS.

Priority Use Group 5 - Resident general use

Priority Use Group 6 - Nonresident, youth or adult non-profit organizations: Less than 55% residents. Organization must provide annual non-profit documentation from the IRS.

Priority Use Group 7 – Non-resident general use

Youth – person under the age of 18 years

Adult – person 18 years or older

Resident – person residing within the city limit boundaries of Santa Cruz.



SCOTT KENNEDY FIELDS FEE SCHEDULE

Field	Youth Non-Profit	Adult Non-Profit	Resident	Non- Resident
Full	\$60/hour	\$82/hour	\$96/hour	\$125/hour
North or South	\$36/hour	\$50/hour	\$59/hour	\$77/hour



Parks and Recreation Department
 323 Church Street
 Santa Cruz, CA 95060
 Ph: 831-420-5270 Fax 831-420-5271
www.santacruzparksandrec.com

**USE APPLICATION FOR CITY
 ATHLETIC FACILITIES**

Park/Beach: _____

Field(s) /Court: _____

Date(s): _____

Times: *start* _____ *end* _____

Purpose of Use (e.g. *games, practice, tournament, etc*): _____

Number of people expected: _____

Company/Organization (if applicable): _____

Non-Profit # _____

Applicant/Coach: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Home phone: _____ Work/Cell phone: _____

Fax number: _____

Please indicate the following:

	YES	NO		YES	NO
Have you reserved with us before?	<input type="checkbox"/>	<input type="checkbox"/>	Will other equipment be used?	<input type="checkbox"/>	<input type="checkbox"/>
Will field lights be used?(\$20/ hour charge) <i>(Beach facilities excluded)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Please explain</i> _____		
Will amplified sound be used?	<input type="checkbox"/>	<input type="checkbox"/>			

I declare under penalty of perjury that I am the authorized representative of the organization (activity) listed on this application and that the information I supplied here in is true and correct. I have carefully read, considered, and agreed to abide by all rules and regulations shown on the reverse.

_____ Applicant's Signature

_____ date

___ I agree to the above term and conditions.



GENERAL REQUEST SCOTT KENNEDY FIELD

Name of Organization/Group: _____

Facility/Field Requested: _____ Approximate Number: _____

Start Date: _____ End Date: _____

Point of Contact: _____ Telephone Number: _____

GENERAL REQUEST-SK FIELD
(circle dates you wish to reserve and enter times below)
JANUARY 2024 – DECEMBER 2024

X = Not available.

<p><u>JANUARY 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td></tr> <tr><td>X</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td></tr> <tr><td>X</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> <tr><td>X</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td></tr> <tr><td>X</td><td>29</td><td>30</td><td>31</td><td></td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S		1	2	3	4	5	6	X	8	9	10	11	12	13	X	15	16	17	18	19	20	X	22	23	24	25	26	27	X	29	30	31				<p><u>FEBRUARY 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td></td><td></td><td></td><td>1</td><td>2</td><td>3</td></tr> <tr><td>X</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> <tr><td>X</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td></tr> <tr><td>X</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td></tr> <tr><td>X</td><td>26</td><td>27</td><td>28</td><td>29</td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S					1	2	3	X	5	6	7	8	9	10	X	12	13	14	15	16	17	X	19	20	21	22	23	24	X	26	27	28	29			<p><u>MARCH 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td>1</td><td>2</td></tr> <tr><td>X</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td></tr> <tr><td>X</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td></tr> <tr><td>X</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td></tr> <tr><td>X</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td></tr> <tr><td>X</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S						1	2	X	4	5	6	7	8	9	X	11	12	13	14	15	16	X	18	19	20	21	22	23	X	25	26	27	28	29	30	X							<p><u>APRIL 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td></tr> <tr><td></td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td></tr> <tr><td></td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td></tr> <tr><td></td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td></tr> <tr><td></td><td>28</td><td>29</td><td>30</td><td></td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S		1	2	3	4	5	6		7	8	9	10	11	12		14	15	16	17	18	19		21	22	23	24	25	26		28	29	30			
S	M	T	W	T	F	S																																																																																																																																																																												
	1	2	3	4	5	6																																																																																																																																																																												
X	8	9	10	11	12	13																																																																																																																																																																												
X	15	16	17	18	19	20																																																																																																																																																																												
X	22	23	24	25	26	27																																																																																																																																																																												
X	29	30	31																																																																																																																																																																															
S	M	T	W	T	F	S																																																																																																																																																																												
				1	2	3																																																																																																																																																																												
X	5	6	7	8	9	10																																																																																																																																																																												
X	12	13	14	15	16	17																																																																																																																																																																												
X	19	20	21	22	23	24																																																																																																																																																																												
X	26	27	28	29																																																																																																																																																																														
S	M	T	W	T	F	S																																																																																																																																																																												
					1	2																																																																																																																																																																												
X	4	5	6	7	8	9																																																																																																																																																																												
X	11	12	13	14	15	16																																																																																																																																																																												
X	18	19	20	21	22	23																																																																																																																																																																												
X	25	26	27	28	29	30																																																																																																																																																																												
X																																																																																																																																																																																		
S	M	T	W	T	F	S																																																																																																																																																																												
	1	2	3	4	5	6																																																																																																																																																																												
	7	8	9	10	11	12																																																																																																																																																																												
	14	15	16	17	18	19																																																																																																																																																																												
	21	22	23	24	25	26																																																																																																																																																																												
	28	29	30																																																																																																																																																																															
<p><u>MAY 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td></td><td></td><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr><td></td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> <tr><td></td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td></tr> <tr><td></td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td></tr> <tr><td></td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td></tr> </table>	S	M	T	W	T	F	S				1	2	3	4		5	6	7	8	9	10		12	13	14	15	16	17		19	20	21	22	23	24		26	27	28	29	30	31	<p><u>JUNE 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td></tr> <tr><td>X</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr> <tr><td>X</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td></tr> <tr><td>X</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td></tr> <tr><td>X</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td></tr> <tr><td>X</td><td>29</td><td>30</td><td>31</td><td></td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S							1	X	3	4	5	6	7	8	X	10	11	12	13	14	15	X	17	18	19	20	21	22	X	23	24	25	26	27	28	X	29	30	31				<p><u>JULY 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td></tr> <tr><td>X</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td></tr> <tr><td>X</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> <tr><td>X</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td></tr> <tr><td>X</td><td>29</td><td>30</td><td>31</td><td></td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S		1	2	3	4	5	6	X	8	9	10	11	12	13	X	15	16	17	18	19	20	X	22	23	24	25	26	27	X	29	30	31				<p><u>AUGUST 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td>1</td><td>2</td></tr> <tr><td>X</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> <tr><td>X</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td></tr> <tr><td>X</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td></tr> <tr><td>X</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td></tr> </table>	S	M	T	W	T	F	S						1	2	X	5	6	7	8	9	10	X	12	13	14	15	16	17	X	19	20	21	22	23	24	X	26	27	28	29	30	31
S	M	T	W	T	F	S																																																																																																																																																																												
			1	2	3	4																																																																																																																																																																												
	5	6	7	8	9	10																																																																																																																																																																												
	12	13	14	15	16	17																																																																																																																																																																												
	19	20	21	22	23	24																																																																																																																																																																												
	26	27	28	29	30	31																																																																																																																																																																												
S	M	T	W	T	F	S																																																																																																																																																																												
						1																																																																																																																																																																												
X	3	4	5	6	7	8																																																																																																																																																																												
X	10	11	12	13	14	15																																																																																																																																																																												
X	17	18	19	20	21	22																																																																																																																																																																												
X	23	24	25	26	27	28																																																																																																																																																																												
X	29	30	31																																																																																																																																																																															
S	M	T	W	T	F	S																																																																																																																																																																												
	1	2	3	4	5	6																																																																																																																																																																												
X	8	9	10	11	12	13																																																																																																																																																																												
X	15	16	17	18	19	20																																																																																																																																																																												
X	22	23	24	25	26	27																																																																																																																																																																												
X	29	30	31																																																																																																																																																																															
S	M	T	W	T	F	S																																																																																																																																																																												
					1	2																																																																																																																																																																												
X	5	6	7	8	9	10																																																																																																																																																																												
X	12	13	14	15	16	17																																																																																																																																																																												
X	19	20	21	22	23	24																																																																																																																																																																												
X	26	27	28	29	30	31																																																																																																																																																																												
<p><u>SEPTEMBER 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>X</td><td>X</td><td>X</td><td>X</td></tr> <tr><td>X</td><td>X</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td></tr> <tr><td></td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> <tr><td>X</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td></tr> <tr><td></td><td>29</td><td>30</td><td></td><td></td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S	1	2	3	X	X	X	X	X	X	10	11	12	13	14		15	16	17	18	19	20	X	23	24	25	26	27	28		29	30					<p><u>OCTOBER 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr> <tr><td></td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td></tr> <tr><td></td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td></tr> <tr><td></td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td></tr> <tr><td></td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td></td></tr> </table>	S	M	T	W	T	F	S			1	2	3	4	5		6	7	8	9	10	11		13	14	15	16	17	18		20	21	22	23	24	25		27	28	29	30	31		<p><u>NOVEMBER 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td>1</td><td>2</td></tr> <tr><td></td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr> <tr><td></td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td></tr> <tr><td></td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td></tr> <tr><td></td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td></tr> <tr><td></td><td>30</td><td>31</td><td></td><td></td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S						1	2		3	4	5	6	7	8		10	11	12	13	14	15		17	18	19	20	21	22		24	25	26	27	28	29		30	31					<p><u>DECEMBER 2024</u></p> <table border="0"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td></tr> <tr><td></td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td></tr> <tr><td></td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> <tr><td></td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td></tr> <tr><td></td><td>29</td><td>30</td><td>31</td><td></td><td></td><td></td></tr> </table>	S	M	T	W	T	F	S	1	2	3	4	5	6	7		8	9	10	11	12	13		15	16	17	18	19	20		22	23	24	25	26	27		29	30	31			
S	M	T	W	T	F	S																																																																																																																																																																												
1	2	3	X	X	X	X																																																																																																																																																																												
X	X	10	11	12	13	14																																																																																																																																																																												
	15	16	17	18	19	20																																																																																																																																																																												
X	23	24	25	26	27	28																																																																																																																																																																												
	29	30																																																																																																																																																																																
S	M	T	W	T	F	S																																																																																																																																																																												
		1	2	3	4	5																																																																																																																																																																												
	6	7	8	9	10	11																																																																																																																																																																												
	13	14	15	16	17	18																																																																																																																																																																												
	20	21	22	23	24	25																																																																																																																																																																												
	27	28	29	30	31																																																																																																																																																																													
S	M	T	W	T	F	S																																																																																																																																																																												
					1	2																																																																																																																																																																												
	3	4	5	6	7	8																																																																																																																																																																												
	10	11	12	13	14	15																																																																																																																																																																												
	17	18	19	20	21	22																																																																																																																																																																												
	24	25	26	27	28	29																																																																																																																																																																												
	30	31																																																																																																																																																																																
S	M	T	W	T	F	S																																																																																																																																																																												
1	2	3	4	5	6	7																																																																																																																																																																												
	8	9	10	11	12	13																																																																																																																																																																												
	15	16	17	18	19	20																																																																																																																																																																												
	22	23	24	25	26	27																																																																																																																																																																												
	29	30	31																																																																																																																																																																															

<p>Completed by Applicant <i>Specify months and/or days if times vary</i></p> <p>Start Time End Time</p>		<p>Office Use Only</p> <p>Request Unavailable</p>	
SUN.			
MON.			
TUE.			
WED.			
THU.			
FRI.			
SAT.			
<p>OFFICIAL USE ONLY</p> <p>APPROVAL: _____ DATE: _____ CONFIRMATION SENT: _____</p>			



PARKS & RECREATION DEPARTMENT
323 Church Street • Santa Cruz, CA 95060
[p] (831) 420-5270 • [f] (831) 420-5271

Nonprofit Authorization Form

Non-profit organization (to be completed by authorized personnel or board representative)

Name of Organization: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Non-Profit Tax ID # _____ **Phone:** _____

This document certifies that the Board of Directors or authorized personnel of our non-profit agency **has approved the following individual(s)** to use this agency's non-profit status to make reservations at City of Santa Cruz facilities.

Authorized User: _____ Phone _____

Authorized User: _____ Phone _____

Authorized User: _____ Phone _____

Authorized User: _____ Phone _____

List any additional names on back or an attachment.

The authorization of use of this non-profit organization's Tax ID recognizes that:

- allows the aforementioned individuals to sign contracts and make reservations at Parks & Recreation facilities and that;
- the non-profit assumes full liability and responsibility for these reservations as stated within the period of authorization.

This authorization extends until _____ (Not greater than 1 year from today's date)

It is understood and agreed that the applicant assumes all risks for the loss, damage, liability, injury, cost or expense that may arise during or be caused in any way by such use of the facilities of the City of Santa Cruz; the applicant further agrees that in consideration of being permitted to use said facilities the applicant will save and hold the said City of Santa Cruz and/or their employees free and harmless from any loss, claim and liability or damages, and/or injuries to persons or property that in any way may be caused by applicant's use or occupancy of said facilities. I, the undersigned, hereby certify that I will be personally responsible on behalf of the applicant for any damage sustained by the grounds, building, furniture, or equipment occurring through the occupancy of said facilities by the applicant.

As the representative of this event, I agree that while I/we use this facility, I/we will not discriminate on the basis of disability. I, the undersigned, have read, and agree to abide by the rules and regulations for the facility use as listed on supplemental materials. The terms of this agreement may not be altered or amended unless the undersigned and the City of Santa Cruz agree in writing to such an alteration or amendment. This agreement may not be orally amended or altered.

Signature _____ Date _____

Title _____

USE OF THE SCOTT KENNEDY FIELD IS SUBJECT TO THE FOLLOWING CONDITIONS

1. A FACILITY RENTAL CONTRACT IS REQUIRED for all reserved uses/events. A signed copy of the contract, including the City approved hold harmless indemnification clause, must be in possession of the event Permittee or representative during the event. This provides verification Permittee has the field reserved at a specific time.
2. RENTAL CONTRACTS ARE ISSUED ONLY TO ADULTS 18 and over. The promoter shall designate an event coordinator to be present throughout the events and has the authority to make decisions regarding this event.
3. GENERAL LIABILITY CERTIFICATES OF INSURANCE in the amount of \$2,000,000 with an endorsement naming the City as an additional insured are required for competitive and certain special events held in City facilities. The insurance company must follow the City of Santa Cruz certificate guidelines. See City's "Standard Insurance Requirement" handout for more information. Proof of Insurance must be provided to the City no less than fourteen (14) days prior to the event.
4. NON-CITY RESIDENTS are charged an additional fee for rental of City facilities per City Council policy.
5. A REFUNDABLE SECURITY DEPOSIT of \$100 is required for all reservations, in addition to rental fees for this outdoor facility. Refund of the deposit will depend on the condition of the facility after use. Trash needs to be placed properly in the garbage containers and the field needs to be clear of clothing, sports/bottles, and any other items. Field equipment must be assessed before and after your use, ANY damage must be reported to the Parks and Recreation office within 24 hours of the reservation. Failure to report any damage or misuse of the field may result in fines and/or termination of permit. If the facility is not left in a satisfactory condition as determined by the Parks and Recreation Department, a portion or all of the deposit will be retained. If the deposit does not cover cost of cleanup or damage, Permittee will be billed additional fees.
6. CITY ADMISSION AND SALES TAX: Any event which charges admission may be subject to the City Admissions Tax (5%). See City's "Admissions Tax Brochure" for more information. Events which include sales may require City Council approval. The City charges a percentage on all sales at events held in City facilities.
7. ATTENDANCE IS LIMITED to the occupant capacity of the facility as established by the City Fire Marshal or as determined by the Parks and Recreation Department.
8. ENTRANCE TO THE FACILITY is allowed at the time specified on the approved application and users are expected to leave at the time specified. Events may be booked back to back so it is important events begin and end on time. Be sure to reserve enough time to allow for set-up and clean-up. Permittee is responsible for clean-up and restoring the area used to the conditions that existed prior to the event or Permittee shall reimburse the City for staff overtime to provide this service.
9. ITEMS NOT PERMITTED on the field include: bicycles, food, drinks (water is the exception), gum and sunflower seeds. There may be NO equipment that penetrates the turf. This includes corner flags, goal anchors, training equipment, pug goals, etc. Equipment may not be left on the field beyond the reservation time. Any equipment requiring an anchor must use a sandbag or other weighted item which is to be provided by the Permittee.
10. EQUIPMENT: CANOPIES are permitted, but MUST BE EQUIPPED WITH RUBBER OR PLASTIC FOOTING, OR FITTED TENNIS BALLS on all surfaces which come in contact with the turf. Support legs/footings with uncovered, sharp or rough material are PROHIBITED as they will cause damage to the turf and other surfaces. FAILURE to provide proper footings on any shade devices may result in fines and/or termination of the permit. If damage occurs as a result of improperly equipped canopies or shade devices a portion or all of the deposit will be retained. If the deposit does not cover cost of damage, Permittee will be billed additional fees.
11. BLEACHERS ARE NOT TO BE MOVED under any circumstances. Only PARK staff or EMERGENCY personnel may move or alter the location of bleachers, if deemed necessary.

12. NO STRUCTURES are to be built and no shrubbery or trees are to be cut, trimmed, or destroyed.
13. NO STAPLES, PINS, TACKS, NAILS, SCREWS or other objects are allowed to be placed into any part of the facility, any equipment or furniture in the facility. NO STAKES OR OBJECTS ALLOWED INTO ARTIFICIAL TURF.
14. PERMITTEE SHALL OBEY ALL PARK RULES. No alcohol consumption, no glass containers and no dogs are allowed in the park. NO ANIMALS, other than Seeing Eye and/or Companion Animals, are allowed in sports fields/complex.
15. NO SMOKING (including e-cigarettes) is permitted in City public buildings and facilities, including sport complexes and park trails.
16. PARKING is available in parking lots and on nearby streets on a PAY PER USE BASIS. No parking is allowed in undesignated areas.
17. NO PUBLICITY of any type may be released for use relating to an event until approval is granted in writing.
18. AN AUTHORIZED REPRESENTATIVE OF THE CITY SHALL HAVE THE RIGHT TO ENTER THE FACILITY and all parts thereof at any and all times during a scheduled event. The City of Santa Cruz retains the RIGHT TO REVOKE PERMISSION for use of a facility at any time. The Parks and Recreation DEPARTMENT MAY TERMINATE ANY SPECIAL EVENT ACTIVITY when it is necessary for the safety, health, welfare, or reasonable enjoyment of the public, for protection of resources, for the violation of any rules and regulations of the City of Santa Cruz, or if it is deemed necessary in the public interest.
19. The PARKS AND RECREATION DIRECTOR MAY MAKE EXCEPTIONS to established policies, rules, and fees when deemed in the best interest of the City or Community.
20. Failure to comply with any of the above conditions may be cause for revocation of this permit.
21. The City reserves the right to change any of these conditions of use if it is deemed necessary.

Print Name: _____ Date: _____

Signature: _____



Certificate of Insurance Requirements

Certificates of Insurance must be current and include the following:

1. Required liability limits (minimum of \$2,000,000 per occurrence, based on scope of work, degree of risk or other circumstance)
2. Name and address of insured
3. Location of event or operation
4. Description of class, event or operation
5. Date issued
6. Policy effective date and policy expiration date – expiration date must be effective through class, event or operation date(s)
7. The City of Santa Cruz must be listed as additional insured on liability insurance policy as follows: "The City of Santa Cruz, its officers, officials, employees, agents and volunteers" Additional Insured Endorsement required: Certificate of insurance alone will not be accepted.
8. The certificate holder must be the City of Santa Cruz. The address should be:

The City of Santa Cruz
1200 Pacific Street Suite #290
Santa Cruz, CA 95060
9. Primary coverage – Any contractor's insurance coverage shall be primary insurance as respects the City, its officers, officials, employees, agents and volunteers.
10. Advance written notice must be provided to the City of Santa Cruz of any modification, change or cancellation of any component of the insurance coverage.
11. Certifications of Insurance and Endorsements are due in advance of class, event or operation.
12. If contractor has employees, Worker's Compensation Insurance meeting statutory limits and a Waiver of Subrogation Endorsement are required. (If no employees, contractor must fill out a Waiver Form stating there are no employees in order to be exempt from the Worker's Compensation Insurance Requirement.)
13. The liability insurance must be on an "occurrence" basis, including products-completed operations, covering the participants in the event or operation, as well as spectators (if applicable).

City reserves the right to modify any of insurance limits (higher or lower coverage amounts) or require additional specialized insurance coverages for specific risk exposures depending on the scope or work or other circumstances. In addition to meeting the insurance requirements, contractors will be required to indemnify and hold the City, its officers, officials, employees, agents and volunteers harmless from any potential liability relating to the event or operation.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
INSURED	INSURER(S) AFFORDING COVERAGE	
	INSURER A:	NAIC #
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR	WVD	POLICY NUMBER	POLICY BEG (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL, GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea. Occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/POP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea. accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE \$ AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below.						<input type="checkbox"/> WC STATL. TOBY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES: (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
The City of Santa Cruz, its officers, officials, employees, agents and volunteers are named as additional insured.

CERTIFICATE HOLDER City of Santa Cruz Risk Management 1200 Pacific Ave. Suite 290 Santa Cruz, CA 95060	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

2 This notice confirms the provisions of the California Insurance Code, §384. Other states have similar provisions. It states that the policy, not the certificate governs coverage.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS IS NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the provisions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in the absence of such endorsement(s).

<p>PRODUCER</p> <p style="text-align: center;"><i>This block identifies the Agent or Broker.</i></p>	<p>CONTACT NAME:</p> <p>PHONE (A/C, No., Ext): _____ FAX (A/C, No.): _____</p> <p>E-MAIL ADDRESS: _____</p>
<p>INSURED</p> <p style="text-align: center;"><i>The insured is your entity's contractor or lessee.</i></p>	<p style="text-align: center;">INSURER(S) AFFORDING COVERAGE</p> <p>INSURER A: _____ NAIC #: _____</p> <p>INSURER B: _____ 3</p> <p>INSURER C: _____</p> <p>INSURER D: _____</p> <p>INSURER E: _____</p> <p>INSURER F: _____</p> <p style="text-align: right;"><i>The insurer will be identified here. The insurer letter appears again near the left margin at "3" to show which insurer provides which coverage.</i></p>

COVERAGES **CERTIFICATE NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD'L SUBR INSR	WAVD	NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY						PER OCCURRENCE \$	
	COMMERCIAL GENERAL LIABILITY						PER OCCURRENCE \$	
	CLAIMS-MADE						PER PERSON \$	
	OCOUR							
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>							
	AUTOMOBILE LIABILITY						PERSONAL & ADV INJURY \$	
	ANY AUTO						GENERAL AGGREGATE \$	
	ALL OWNED AUTOS						PRODUCTS - COM/PROP AGG \$	
	HIRED AUTOS							
	SCHEDULED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$	
	NON-OWNED AUTOS						PROPERTY (Per person) \$	
	UMBRELLA LIAB						PROPERTY (Per accident) \$	
	EXCESS LIAB						DAMAGE \$	
	OCOUR							
	CLAIMS-MADE						RETENTION \$	
	DED.							
	RETENTIONS							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						TD- MITS \$	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH- ER \$	
	Y/N <input type="checkbox"/> N/A <input type="checkbox"/>						ACCIDENT \$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							- EA EMPLOYEE \$

9 This section will usually be used to restrict coverage to a specific job or lease. Watch for restrictions that would omit the coverage required by your specifications.

11 Cancellation provisions

<p>CERTIFICATE HOLDER</p> <p style="text-align: center;">10 Certificate holder is your entity.</p>	<p>CANCELLATION</p> <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p>
	<p>12 AUTHORIZED REPRESENTATIVE</p> <p style="text-align: center;"><i>The authorized representative of the insurer should be an employee, unless the agent or broker is specifically authorized to sign on behalf of the company.</i></p>

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
WHERE REQUIRED BY WRITTEN CONTRACT.	WHERE REQUIRED BY WRITTEN CONTRACT.
Information required to complete this schedule, if not shown above, will be shown in the Declarations.	

EXAMPLE

A. Section II – Who is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations;
whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

EXAMPLE





Parks & Recreation

Scott Kennedy Fields Reservation Agreement

Thank you for reserving Scott Kennedy fields. The following sheet will serve as an agreement for all dates reserved by your group.

☞ **FIELD ITEMS**

The following items are NOT permitted on the field: food, drinks (water only), gum, sunflower seeds, There may be NO equipment that penetrates the turf. This includes corner flags, goal anchors, training equipment, pug goals, etc. Equipment may not be left on the field beyond your reservation time. Any equipment requiring an anchor must use a sandbag or other weighted item which is to be provided by the permittee. _____ (initials)

☞ **RESERVATION TIME**

Your group is responsible for arriving and departing within the reserved time. Often times, reservations are booked back to back. It is important that you reserve enough time to allow for set up and take down. If requesting a half-field, you must use the area designated on the printout. _____ (initials)

☞ **INSURANCE**

If your reservation has been determined to require insurance, it must be presented to the sports office two weeks prior to the event. Insurance must list the City of Santa Cruz as additional insured and must carry \$2,000,000. The insurance company must follow the City of Santa Cruz certificate guidelines. (See additional sheet) _____ (initials)

☞ **OTHER ITEMS**

Keep the facility reservation form and the detailed computer printout with you on the day of your reservation. This is your verification that you have the field reserved at that specific time. All reservations require a \$100 deposit. Fields must be left in the same condition as received. Trash needs to be placed properly in the garbage containers and the field needs to be clear of clothing, sports bottles, and any other items. Field equipment must be assessed before and after your use, ANY damage must be reported to the Parks and Recreation office within 24 hours of the reservation. Failure to report any damage or misuse of the field may result in fines and/or termination of permit. _____ (initials)

Thank you again for your reservation. If you have any other questions or concerns, contact the Parks and Recreation office at 420-5270.

City of Santa Cruz
Parks and Recreation Department

**FOR RESERVATIONS
CALL 420-5270**

**Field Hours
9am to Sunset
Unless gates are locked**

**Field Rules
FOOT TRAFFIC ONLY
NO SMOKING
NO FOOD, GUM OR
SUNFLOWER SEEDS
NO ALCOHOL/SODA
NO GLASS
NO DOGS
NO GOLF
NO OPEN FLAMES
NO SPIKES/STAKES**

RESERVATIONS HAVE PRIORITY

**During NON-RESERVED
time use is limited to:
1 hour on 1/2 the field
if people are waiting**

NO BASEBALL

**For reservations or info
call 420-5270**

City of Santa Cruz Parks and Recreation Department