



City of Torrance - Community Services Department

Facility Booking Office: 3031 Torrance Blvd., Torrance, CA 90503

Phone: (310) 618-5982 • Fax: (310) 781-7598

E-Mail: FacilityBooking@TorranceCA.Gov

VICTOR E. BENSTEAD PLUNGE RENTAL PACKET

RENTAL CHARGES

	Half Pool	Whole Pool
Non-Profit Rental (2 hour minimum):	\$85.00 per hour	\$105.00 per hour
Private/Commercial Rental (2 hour minimum):	\$150.00 per hour	
Pool Filming Rental (4 hour minimum):	\$350.00 per hour	

LIFEGUARD CHARGES

Lifeguard charges are assessed per hour by group size and are in addition to the hourly Rental Charges listed above. Lifeguard charges for all rentals are as follows, effective July 1, 2018:

Group Size	Charge
0-49	\$40.00 per hour
50-99	\$60.00 per hour
100-149	\$80.00 per hour
150-200	\$100.00 per hour

RENTAL CHARGE RATE DEFINITION

- Non-Profit means an organization with 501(c)(3) Federal Tax Exempt status or California Tax Exempt status. *Proof of 501(c)(3) status is required.*
- Private means an individual group reserving space for personal use, rather than 'for-profit' programming.
- Commercial means an individual or group reserving space for 'for-profit' programming. Commercial Groups must obtain a City of Torrance business license.
- Filming means an organization reserving space for the purpose of filming, including Television, Commercials, Movies, Videos, Publicity Shots, etc.

INSURANCE

All Individuals/Organizations are required to provide proof of Comprehensive General Liability Insurance with Endorsement in the amount of One Million Dollars (\$1,000,000) per occurrence and Two Million Dollars (\$2,000,000) aggregate. Additional insured language must be included and read as follows:

"The City of Torrance, the City Council, and each member thereof, and every officer and employee of the City, and every member of Boards and Commissions"

RULES AND REGULATIONS

- The representative of each user group is responsible for supervising the clean-up of any area used by his/her group including, but not limited to wiping down tables, disposing of any food in the trash cans provided outdoors, and returning tables and chairs to their original locations.
- No glass or gum permitted.
- No alcoholic beverages of any type permitted.
- No diapers – children must be toilet trained.
- Food and beverages are not allowed on the deck or in the lobby.
- Food and beverages may be prepared and served on the grass area adjacent to the Plunge.
- Floatation devices and toys are allowed.
- Music is allowed – representative must provide music. The City of Torrance will not provide music.

- Children under age seven (7) must be accompanied in the pool by an adult. One (1) adult per child.
- The time reserved must include the party as well as set-up and clean-up time.
- Your group will be billed for any damages and/or the amount will be deducted from your deposit.

Should you have any questions or concerns, please feel free to contact the Facility Booking Office at (310) 618-5982, or by email at FacilityBooking@TorranceCA.Gov.

Name: _____

Signature: _____ Date: _____



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VICTOR E. BENSTEAD PLUNGE RENTAL APPLICATION

APPLICANT INFORMATION

NOTE TO APPLICANT: Any person applying for the use of City property on behalf of any society, group or organization must present satisfactory credentials or proof of authorization to the Community Services Department representative in charge of permits, prior to the filing of such applications.

Date of Application: _____ E-Mail Address: _____

Name of Representative: _____ Title: _____

Home Phone: _____ Work Phone: _____

Address: _____ City: _____ Zip Code: _____

Name of Organization: _____ Phone: _____

Address: _____ City: _____ Zip Code: _____

Type of Organization: Private Commercial Non-Profit 501(c)3 # _____

**NO ALCOHOLIC BEVERAGES OF ANY TYPE ARE ALLOWED
AT ANY OF THE CITY PARKS OR PARK FACILITIES PER MUNICIPAL CODE 49.2.6**

ACTIVITY INFORMATION

Date Requested: _____ Day of Week: _____ OR Continuous Dates From: _____ to: _____

Time Requested: _____ AM/PM to: _____ AM/PM Total Number of Hours: _____

Type of Activity: _____ Estimated Attendance: _____

USERS MUST AGREE TO THE FOLLOWING TERMS

GROUP IS RESPONSIBLE FOR SET-UP AND CLEAN-UP; failure to do so may result in PARTIAL/FULL loss of security deposit.
Please initial here: _____

Group is responsible for observing all facility Rules and Regulations and for maintaining an acceptable standard of behavior; failure to do so may result in partial/full loss of security deposit.

Signature of person requesting reservation: _____ Date: _____

FOR OFFICE USE ONLY

FEES		OTHER
Pool		
____ Hrs. @ _____	\$ _____	_____
Refundable Deposit	\$ <u>250.00</u>	_____
Lifeguard Fee		Refund Process Started Date: _____
____ Hrs. @ _____	\$ _____	<input type="checkbox"/> Refund Denied: See attached
Total Fee	\$ _____	
	Date Paid: _____	
	Check # _____	
	Receipt # _____	

The above application IS GRANTED NOT GRANTED

By: _____ Date _____



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REQUEST TO PAY BY CREDIT CARD

PERMIT DELIVERY

Please choose one (1) option.

I would like my permit and receipt:

E-Mailed: _____

Mailed – Reservation date must be at least two (2) weeks in the future.
Please indicate address if different on reservation/application form:

CREDIT CARD INFORMATION

I hereby authorize use of my: Visa MasterCard
 Discover American Express

Print Name As It Appears on Card: _____

Credit Card Number: _____ Zip Code: _____

Expiration Date Month: _____ Year: _____ CVV#: _____ Amount Authorized \$ _____

Signature: _____ Date: _____

A surcharge will be added to all credit and debit card transactions.

DAMAGES, OVERAGE AND IMPROPERLY INCURRED EXPENSES

In the case of any damage to the facilities being rented or if the facilities are not left in the same condition that they were in before the start of this contract, damages or expenses (cleaning, repair, replacement, and otherwise) will be billed directly to the credit card provided for this purpose. For building, gym, pool and rink reservations, the hourly fee will be charged for each portion of an hour that you stay past your scheduled end time. In addition to the amount incurred in damages, the credit card on file may be charged up to \$500.00 for any breach of contract.

I have read and understand Damages, Overage and Improperly Incurred Expenses and authorize my credit card to be charged.

Signature: _____ Date: _____

Please include with a completed application to:

Facility Booking

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