

**City of Montclair**  
**Human Services Division**

**Inflatable Playground Equipment Permit and Reservation Form**

Reservation forms must be submitted to the Human Services Division at least ten days prior to the date requested to insure adequate time to process and schedule your request.

\*\*\*\* Please Print – Use Pen or Typewriter \*\*\*\*

**Requesting Group or Individual**

Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Telephone: Day \_\_\_\_\_ Evening \_\_\_\_\_

**Specific Request – Day and Time**

Park Being Requested \_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_

Time: From \_\_\_\_\_ to \_\_\_\_\_

If the Park is not available, are you willing to schedule another park?

Yes \_\_\_\_\_ No \_\_\_\_\_

I, the undersigned, on behalf of the above mentioned organization or individual do hereby certify that I have read and agree to abide by the procedures governing the uses of the inflatable playground equipment at the requested park listed above. I will specifically accept responsibility for any damage to the park site as a result of occupancy of the inflatable playground equipment. I hereby hold harmless the City of Montclair, its officers, employees and agents from any and all liability from damages or loss or injury either to person or property which may be sustained while using the inflatable playground equipment at this site.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Human Services Division Use Only**

Date Request Received \_\_\_\_\_

Insurance Certificate Received \_\_\_\_\_

Permit Reservation Form Received \_\_\_\_\_

Review Procedures with Applicant \_\_\_\_\_

Name of Park Reserved \_\_\_\_\_

Date and Time \_\_\_\_\_

Amount Received \_\_\_\_\_

Received by \_\_\_\_\_

Approved by \_\_\_\_\_

Date Approved \_\_\_\_\_