



Hayward Area Recreation and Park District

Inquiry for Rental of a H.A.R.D. Facility

Name: _____ Date of Request: _____

Address: _____ City: _____ ZIP: _____

Phone: _____ Email: _____

Alternate Phone: _____

If it is for an Organization, please fill out the organization information below:

Organization Name: _____

Address: _____ City: _____ ZIP: _____

Organization Phone: _____

Event Information:

Expected Attendance: _____ Name of Event: _____

Type of Event (i.e. picnic, wedding, birthday, etc): _____

Requested Date of Event: _____ Alternate Date: _____

Times: Setup Start: _____ Event Start: _____ Event End: _____ Clean Up: _____

Facility/Facilities Requested: _____

Will you be collecting an entrance fee onsite? Yes ___ No ___ If yes, what is the fee? _____

Will participants pay a fee in advance to participate? Yes ___ No ___ If yes, what is the fee? _____

Is it a free event? Yes ___ No ___

Is this a private event? Yes ___ No ___

Is this event open to the public? Yes ___ No ___

Is this event for minors under age 18? Yes ___ No ___