



ALAMEDA RECREATION AND PARK DEPARTMENT (ARPD)  
 2226 Santa Clara Avenue, Alameda, CA 94501  
 (510)747-7529 / Fax: (510) 523-4071 / Email: [arpd@alamedaca.gov](mailto:arpd@alamedaca.gov)

## 2023 TENNIS COURT RENTAL FACILITY USE PERMIT

**LOCATIONS:** Franklin, Krusi, Leydecker, Longfellow and Washington Parks

**DAYS:** All days of the week

**HOURS:** Parks open dawn to dusk; no loitering after dusk. Lighted athletic facilities open to 10:00 PM

### RESERVATIONS

- **For availability** and to submit your Tennis Court Rental Facility Use Permit contact:  
 Stacy Thomas, Recreation Supervisor 1 at [SThomas@alamedaca.gov](mailto:SThomas@alamedaca.gov)
- **Tennis Court Rental Facility Use Permits and Policies** are located on the ARPD website at [www.alamedaca.gov/Departments/Recreation-Parks](http://www.alamedaca.gov/Departments/Recreation-Parks) under Rentals
- **All requests** must be submitted with a minimum of 7 business days in advance and a maximum of 6 months prior to your event.
- **Permits** are issued to adults 21 years and over.
- **Proof of residency** is required to obtain Alameda residency rates. A utility bill is preferred.
- **No changes** allowed to your permit 7 business days prior to event.
- **No on-going permits issued** for a regular week-to-week or month-to-month basis.
- **Reservation signs are posted.** Your space is only guaranteed for the paid times listed on your permit.

### CANCELLATIONS

- **Cancellations: Less than 7 business days to your event will forfeit all fees. More than 7 business days to your event a \$15 fee will be charged and the rest of the fees refunded.**
- **Rainy Day Policy:** Please advise our office on the first business day after your reservation if your tennis court rental was cancelled due to rain and you will receive a credit on your ARPD account. No refunds.

### HOLD HARMLESS AGREEMENT

"I, \_\_\_\_\_ and/or Organization \_\_\_\_\_ shall indemnify,  
 (Print Name) (Print Organization Name)  
 defend, and hold harmless City, its City Council, boards, commissions, officials, employees, and volunteers ("Indemnitees") from and against any and all loss, damages, liability, claims, suits, costs and expenses whatsoever, including reasonable attorneys' fees ("Claims"), arising from or in any manner connected to "individual/group/organization" use of City property or equipment, whether alleged or actual."

\*\*\*I have read the Sports Facilities Tennis rules and regulations pertaining to tennis courts and agree to abide by them. Failure to comply with the ARPD policies may result in loss of your security deposit or the privilege of further rentals.

NAME OF INDIVIDUAL IN CHARGE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NAME OF ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PRIMARY PHONE \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

PURPOSE OF EVENT \_\_\_\_\_

TENNIS COURTS – Please check the desired tennis court(s) you would like to reserve:

FRANKLIN #1		LEYDECKER #1		WASHINGTON #1		WASHINGTON #4	
FRANKLIN #2		LEYDECKER #2		WASHINGTON #2		WASHINGTON #5	
KRUSI #1		LEYDECKER #3		WASHINGTON #3		WASHINGTON #6	
KRUSI # 2		LONGFELLOW #1					
KRUSI #3							

DATE OF EVENT \_\_\_\_\_

HOURS OF USE: FROM \_\_\_\_\_ TO \_\_\_\_\_ ESTIMATED ATTENDANCE \_\_\_\_\_

**RENTAL FEES PER COURT:**

Residents: \$10/hour with a 1-hour minimum and a 3-hour maximum	Non-Residents: \$12/hour with a 1-hour minimum and a 3-hour maximum
Youth Organization / Schools: \$8/hour	Camp / Private Instruction Fee: \$20/hour
Tournament Fee: \$200/day plus hourly fee	City Coordinated Tournaments – Fee Determined on Recovering Costs

**ALL FEES MUST BE PAID IN FULL AT THE TIME RESERVATION IS ISSUED.** Cash, Checks, Credit Cards (VISA, Master Card, Discover Card and American Express) accepted.

INSURANCE PROVIDED:  YES  PENDING  NOT APPLICABLE

TENNIS COURT(S): \_\_\_\_\_ hours @ \$ \_\_\_\_\_ per hour @ # of court(s) \_\_\_\_\_ = \$ \_\_\_\_\_

TOURNAMENT FEE: \_\_\_\_\_ \$ \_\_\_\_\_ per day = \$ \_\_\_\_\_

OTHER: \_\_\_\_\_ hours @ \$ \_\_\_\_\_ per hour @ # of court(s) \_\_\_\_\_ = \$ \_\_\_\_\_

TOTAL AMOUNT DUE: \$ \_\_\_\_\_

NOTES:

**PAYMENT REQUIRED TO COMPLETE YOUR RESERVATION**

CASH  CHECK # (Make payable to ARPD) \_\_\_\_\_

CREDIT CARD:  MasterCard  VISA  Discover  American Express

Name on Card: \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ CVV Code \_\_\_\_\_