

ORIGINAL
 Staff MA
 AUG 20 2010
 Milpitas Parks
 and Recreation

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CITY OF MILPITAS - INDOOR FACILITY USE APPLICATION

If your rental facility is unacceptable, and a facility attendant is unavailable, please call the following:
 Recreation Services 408-586-3210. (Monday-Thursday, 8:00 a.m.-6:00 p.m., Friday, 8:00 a.m.-5:00 p.m.); (All Other Hours) Police
 Dispatch 408-586-2400. If facility is not open at designated time, please wait 15 minutes before calling Police Dispatch.

Date(s) of Use 8-27-2011 Facility Circle One: (MCC) MSRC ADOBE MSC Room AUD-(5,7,8) ^(10 AM - 5 PM)
 Time you wish to begin set-up 7:30 AM Time function begins 8 AM Time function ends 8:30 PM
 Applicant (person responsible for rental of facility) ROBIN L. BOSTORFF
 Name of Group/Organization/Company facility is being rented for A.A. OF SANTA CLARA COUNTY
 Type of Event (be specific) UNITY DAY-AA
 Applicant Address 1541 WATTA ST City MILPITAS Zip 95035
 Day Phone 408-391-6569 Evening Phone 408-945-7981 E-Mail Address: AllAboutRecovery@ATT
 *Is event open to the public? Yes No Number of people expected Total 500 (Youth 25 Adults 475)
 Fundraising event? Yes No
 Will food or other items be sold and/or charging admission? Yes No *If yes, describe amounts: _____
 Will food be served? Yes No Re-warming of food is allowed in the kitchen. No food preparation is permitted.
 *Will alcohol be served? Yes No Will alcohol be sold? Yes No
 (If I will be selling alcohol at my event, I understand and agree by signing this form to get additional insurance and to get an alcohol permit at least 45 days in advance of my event.)
 Will there be music? Yes No Type (circle one) Band DJ Other _____
 Will there be additional equipment used? Yes No If yes, list: _____
 * Additional fees and insurance is required

I, the applicant, hereby agree to hold the City of Milpitas and any officer and employee thereof free and harmless for any loss, damage, liability, cost or expense that may arise during or be caused in any way by such use of the facilities of the City of Milpitas. I further agree to furnish such liability or other insurance for the protection of the public and the City of Milpitas, and any officer and employee thereof as the City may require. I agree to reimburse the City of Milpitas for any damage to said facilities arising out of the use herein requested. I have read and understand the clean-up and decorating responsibilities, cancellation policy and Facility Use Rules and Regulations approved by City Council 12/1/2009. Initial B

By signing this form, I understand and agree to abide by the City's cancellation policy and the Facility Use Rules and Regulations approved by the Milpitas City Council on December 1, 2009.

After said rental or cancellation of rental date, I understand that the City will return my cleaning and damage deposit in the form of a City check. This check will be mailed in approximately 30 days from the rental date or cancellation of rental date, unless damages, additional maintenance, services, additional rental fees, or cancellation fees need to be assessed. This check will be made payable to me, the applicant, and will be mailed to my address listed on this application.

I hereby certify that all statements made in this application are true and I agree and understand that any misstatement or omission of material fact may cause cancellation of my rental date. By signing this form, I further agree to be bound by the commitments and obligations stated herein.

Robin L. Bostorff Signature of Applicant 8-20-2010 Date

FOR OFFICE USE

Staff Approval Signature: [Signature] PERMIT #/ STAFF INITIALS 12843
 Date: 8/28/10 Insurance: Yes No Date-Paid/Initials Refund Amt: _____
 Voucher #: _____ Date sent to A/P: _____ Approval: _____



**INTERGROUP CENTRAL OFFICE
OF SANTA CLARA COUNTY, INC.**

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August 11, 2010

Milpitas City Council
City of Milpitas
455 East Calaveras Boulevard
Milpitas, California 95035

Greetings:

We are, once again, applying for a waiver of rental fees pursuant to section 3.5 of the "City of Milpitas Facility Manual, Indoor and Outdoor Facilities", this time for our Unity Day event scheduled for Sunday, August 21, 2011. You granted our petition to waive these rental fees for our August 22, 2010 event and we're very grateful; thank you. We have held this event in this terrific facility for several years and hope to continue this relationship for many more.

Incorporated in 1975, InterGroup Central Office of Santa Clara County, Inc. is a California non-profit corporation, fully tax exempt under Section 501(c)(3) of the Internal Revenue Code and Section 23701d of the California Revenue and Taxation Code. We are the Central Office of Alcoholics Anonymous in Santa Clara County, serving about 540 meetings and thousands of members each week. Among many others, our services include our 24 hour hotline, the publication and distribution of our Meeting Directory for those 540 meetings, the sale and distribution of A.A. literature, and the coordination of educational and unifying events such as this one, our annual "Unity Day". This event, open to all, is designed to inform our members of the service opportunities in Alcoholics Anonymous, to encourage their participation, and to focus attention on reaching and serving the still-suffering alcoholic.

A little bit about us: One of our guiding principles (we call them "Traditions") is that we are fully supported financially by contributions from our members only. This means we receive no public funds or funds from other foundations, organizations, and individuals, even if offered. Likewise, we do not "politic", nor do we espouse positions on issues or events outside our Fellowship. Our efforts and attention are focused intently on our primary purpose of maintaining our sobriety and helping others find sobriety.

Please let me know if you require more information. I would be happy to answer any questions, by attending your Council meeting or in any other manner.

Many thanks to you for your consideration of this request.

Respectfully submitted,

Bruce Kirschenmann
Manager

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<http://www.aaanjose.org>