

## Foster City Parks and Recreation Personal Trainer/Instruction Permit Application

No individual or business may operate on City property including parks without permission from the City of Foster City. Individuals and/or businesses cannot use park space for private gain. This permit application is for prospective trainers/instructors who will work with no more than two (2) clients at a time. For instructors/trainers who wish to offer a class (three or more clients at one time), you must complete and submit a Contract Instructor Application packet.

Contact Informatio	n				
Organization or Trainer:					
Representative's Name:					
City:		State:	Zip:		
Office Phone:		Cell Phone:			
Email:		Website:			
Social Media: Facebook.com/		Instagram.com/			
Twitter.com/		Hashtags:	Hashtags:		
Park/Field Use Location:  Duration:  Preferred Day(s):  Preferred Time(s)	Fitness Court at Shoreb	■Wed	Sea Cloud Park  2 days/week (4 hrs)  Thu  Fri  **Jote: Park Hours are Dawn to Dusk.**		
	per person per (circ	per V	ther:  Week/Month/Other:  Beginning of Duration		

Current Permit Rate \$40 per month for 1 day per week (cannot exceed 2 hours per week) \$80 per month for 2 days per week (cannot exceed 4 hours per week)

## Terms and Conditions:

- The Foster City Parks and Recreation Department's Fitness Trainer Permit Application is a pilot program which will take place between May 1, 2019 through December 21, 2019. During this time, City staff will monitor and evaluate the program to determine if the program should continue or make any adjustments to the program that deem necessary.
- Park users must comply with the City's Park Rules Agreement.
- Monthly permit fees will be due to the Parks and Recreation Department by the 1st of every month. Fitness Trainers also have the option to pay in advance. A \$15 late fee will be applied starting on the 15th day of the month. Checks are made payable to City of Foster City. A 2.75% service fee will be charged when payments are made by credit card.
- Foster City Parks and Recreation observes the right to revoke the park and Fitness Trainer permits and retain all fees collected if permit holder fails to adhere to all rules, policies, and conform to the proper use of park property.

**Required Documents:** Please include the following items with your application before sending to Foster City Parks and Recreation c/o Fitness Trainer Permits at 650 Shell Blvd, Foster City, CA 94404.

- A brief business history, including the size of the organization and years in business. Please include resume.
- Copy of current City of Foster City Business License. For info on this, email businesslicense@fostercity.org.
- Park Permit
- Copy of brochure and/or other promotional materials (if applicable)
- List of fees and services
- Proof of First Aid Certification
- Copy of your participant waiver
  - ⇒ \$1,000,000 Certificate of Liability Insurance; \$2,000,000 aggregate for bodily injury, personal injury and property damage
  - ⇒ Certificate Holder must read: City of Foster City, Estero Municipal Improvement District, 650 Shell Blvd., Foster City, CA 94404. Description box must read: The City of Foster City/EMID, its elective and appointive boards, commissions, officers, agents and employees are included as an additional insured in accordance with the terms and conditions of the general liability policy.

## AGREEMENT FOR USE

Applicant hereby agrees to hold the Estero Municipal Improvement District, the Parks and Recreation Department, the City of Foster City, the individual members thereof and all District and City agents and employees free and harmless from any loss, damage, liability, cost or expense that may arise during or be caused in any way by such use or occupancy of said facility. I, the undersigned, hereby certify that I will be personally responsible on behalf of the applicant for any damages sustained to the turf, lights, nets, tables, or equipment or damages sustained to the above shall be compensated within seven days. I realize that the reservation is granted with the understanding that the Department may cancel when the facility is needed for its own program. It is my responsibility to notify the Department of any cancellation on my part. Permit must be shown upon request. I Submission of this form is not a guarantee for use.

Applicant (print name):	Date:	
Applicant Signature:		
	FOR OFFICE USE ONLY	