## CITY OF CERRITOS - RECREATION SERVICES DIVISION COMMUNITY ORGANIZATION APPLICATION - 2025 CALENDAR YEAR

Please complete this application form and su	ubmit the following information, tog	gether with your application	on:
CURRENT ORGANIZATION MEM with complete addresses and phone CURRENT ORGANIZATION BYLA	e numbers of each member.	include <b>ALL</b> members of	your organization,
WRITTEN PROOF OF VALID REG		ORGANIZATION FROM	THE STATE OF
california and the IRS  CERTIFICATE OF INSURANCE A  or practice, i.e., sports groups, dan  of \$1 million (\$5 million for aquatic  Holder" and the "City of Cerritos, it  RETURN COMPLET  Community Organization Application,	nce groups, etc., must provide an o based organizations and activities agents, officers, employees, and FED APPLICATION AND SUPPOR	riginal certificate of insura ), naming the City of Cerr volunteers as additional i TING DOCUMENTS TO:	ance in the amount ritos as "Certificate insured."
GROUP NAME:			
MAILING ADDRESS:		;	 ZIP:
WEBSITE:			
Total Number of Members:		who are Cerritos Residen	ts:
<b>EXECUTIVE BOARD</b> (Adapt positions for			
President			
Address			
City Zip	City		Zip
Home Phone	Home Phone		
Mobile Phone	Mobile Phone		
Email	Email		
Vice President	Treasurer		
Address	Address		
City Zip			
Home Phone	Home Phone		
Mobile Phone			
Email	 Email		
Is your organization or your members affil	liated with any other Cerritos Comr	nunity Organization(s)?	Y N
If yes, please list:			
I hereby acknowledge that all of the information organization's bylaws are complete and accurate. this application. Additionally, this organization we other pertinent information as they occur.  Further, I the undersigned designated representations.	I acknowledge that submittal of inaccivill notify the City of Cerritos in writing	curate or incomplete informa of any changes of contact p	ation may result in denial of
of each member of said Organization, being gra- recitals and/or stage events, picnic shelters, and, hold harmless the City of Cerritos, its officers, ag- suffered by him/her/them as a result of the parti- acts or omissions of the City of Cerritos or its of Organization, further agree to indemnify the City the harms specified herein.	anted permission to utilize City of Cer /or athletic fields for play or practice, f gents, employees and volunteers, for a cipant(s) taking part in the aforementic fficers, agents, employees or volunteer	ritos facilities for meetings, for each of their heirs, execull harm, accidents, personal oned activities, including hars. I, undersigned, on beha	, banquets, special events, utors and assigns, agree to injury or property damage rm resulting from negligent alf of each member of said
Authorized Signature (President or Executive	e Director)	Date	
FOR CITY OF CERRITOS USE ONLY			
CALENDAR YEAR: DATE RECEIVED TOTAL MEMBER COUNT: RESIDENT:			
REVIEWED/APPROVED BY: RESIDENT:			
CHECKLIST: MEMBERSHIP ROSTER BYLA			
LETTER OF VERIFICATION ON SCHO (Local school/parent-based organiza	OOL LETTERHEAD SIGNED BY THE PRINCIPAL itions/booster clubs <b>only</b> )	IRS PROOF OF NO	N-PROFIT 10/2024