

**From:** [alex@catalyzesv.org](mailto:alex@catalyzesv.org)  
**To:** [Le, Cuong](#); [Truong, Hoang](#)  
**Cc:** [Severino, Lori](#); [Rivas, Vanessa](#); [Han, James](#); [Mendez, Zacharias](#)  
**Subject:** Re: Request for Form to Reserve Space at VACC  
**Date:** Wednesday, March 4, 2020 12:22:04 AM  
**Attachments:** [RentalApplication\\_FacilityUseRequest for VACC on 5920.pdf](#)

---

[External Email]

Cuong - Thank you for the information & the form.

Hoang - Can I understand the full cost before we give our credit card info? Also, if we're making this reservation as part of a grant from / in partnership with the City of San Jose - the staff with whom we're working are copied here - are the costs different or waived?

Thank you for the time,  
Alex

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Alex Shoor  
Executive Director  
Catalyze SV  
[alex@CatalyzeSV.org](mailto:alex@CatalyzeSV.org)  
[www.CatalyzeSV.org](http://www.CatalyzeSV.org)

On Mar 3, 2020, at 6:06 PM, Le, Cuong <[cuong.le@sanjoseca.gov](mailto:cuong.le@sanjoseca.gov)> wrote:

Hello Alex,

Please fill out both sides of the attached rental request form and send back to Mr. Hoang Truong, VACC Recreation Specialist, [hoang.truong@sanjoseca.gov](mailto:hoang.truong@sanjoseca.gov) (cc'd in this email) and Hoang's office phone#: 408-794-6965. Any questions regarding your rental reservation request, please contact Mr. Hoang.

Regards,

**Cuong Le** | Acting Senior Recreation Leader  
[Parks, Recreation and Neighborhood Services](#)  
**Vietnamese American Cultural Center**  
**Trung Tâm Văn Hóa Việt-Mỹ**  
at Shirakawa Center | P. 408-794-6552  
2072 Lucretia Avenue, San Jose, CA 95122  
*Building Community Through Fun*

---

**From:** Alex Shoor [<mailto:alex@CatalyzeSV.org>]  
**Sent:** Tuesday, March 3, 2020 5:45 PM  
**To:** Le, Cuong <[cuong.le@sanjoseca.gov](mailto:cuong.le@sanjoseca.gov)>  
**Subject:** Request for Form to Reserve Space at VACC

[External Email]

Mr. Le,  
Thanks for your time just now. Could you send me the form to reserve space at the VACC?  
I'm looking to reserve it from 9 am to 12:30 pm on Saturday, May 9.  
Thank you,  
Alex  
Alex Shoor  
Executive Director  
Catalyze SV  
[alex@CatalyzeSV.org](mailto:alex@CatalyzeSV.org)  
[www.CatalyzeSV.org](http://www.CatalyzeSV.org)

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

<RentalApplication\_FacilityUseRequest.pdf><RentalRate\_VACC.pdf>

## Facility Use Request/Application

Department of Parks, Recreation and Neighborhood Services

*\*Submitting this Request/Application does not guarantee a reservation*

To reserve the facility please follow the instructions below:

1. Call and schedule an appointment with the rental coordinator.
2. Provide proof of non-profit status or a valid business license (if applicable)
3. Complete application, sign rules forms and pay 50% deposit of estimated fees which includes a non-refundable application fee.

*\*Fees will not be collected until an appointment has been made by the Facility Coordinator*

**FACILITY INFORMATION:** Group is responsible for set up and clean up the day of the event within the times listed.

Facility or Building Requested Shirakawa Comm. Ctr. Equipment Requested None

Type of Event Visioning Workshop Estimated Attendance Youth 5 Adults 40 Total 45

Room/Area Requested	Day	Dates	Set Up Time	Event Time	Clean Up Time	Exit Time
VACC	Sat	May 9	8:50 am	10:00 am	12:00 pm	12:45 pm

**APPLICANT INFORMATION:** Either the primary or secondary contact MUST be present, for the duration of the event.

Organization Name (if applicable) Catalyze SV (Social Good Fund) Phone 408-599-9817

Is your Organization a Non-Profit entity? Yes ☒ No ☐ If yes, non-profit number 46-1323531

Applicant's name Alex Shoor Primary Phone 408-599-9817 Secondary Phone \_\_\_\_\_

Address 196 N 3rd St 3rd floor City San Jose Zip Code 95112

Email Address alex@catalyzesv.org

Alternate Contact Name Lori Severino Primary Phone (408) 535-3537 Secondary Phone \_\_\_\_\_

A valid Driver's license or Identification card must be present the day of the event and shown to the Facility Attendant before he/she will open the facility.

Additional Authorized Contacts Name \_\_\_\_\_ Primary Phone \_\_\_\_\_

Additional Authorized Contacts Name \_\_\_\_\_ Primary Phone \_\_\_\_\_

**EVENT INFORMATION:** Please answer each question by placing an "X" in the appropriate box.

	Yes	No		Yes	No
Is the event open to the public?	X		Will a caterer be used?		X
Is this a fundraising event?		X	Will refreshments be served?	X	
Will a fee be charged?		X	Will alcohol be served?*		X

\* NO HARD LIQUOR IS ALLOWED. NO EXCEPTIONS!

### OFFICE USE ONLY:

Staff Person Accepting Application \_\_\_\_\_ Time \_\_\_\_\_ Date \_\_\_\_\_

Staff Person Reviewing Application \_\_\_\_\_ Date \_\_\_\_\_

Application Status ☐ Application Fee Attached ☐ Non-Profit Status Attached ☐ Insurance Attached

Approved \_\_\_\_\_ Receipt/Permit # \_\_\_\_\_ Date \_\_\_\_\_

Declined \_\_\_\_\_ Reason \_\_\_\_\_ Customer Notified \_\_\_\_\_

Staff Notes \_\_\_\_\_

---

---

---

---

Furthermore, I/We have and agree to abide by the City of San Jose rules and regulations pertaining to the use of the recreation center buildings. I/We understand further that I/We will be held financially responsible for any damage to facilities or equipment that occurs through our group's use of the building.

Applicant's signature: Alex Sh Date: 3/3/20

I/We understand that **only** the **Community Center** will reserve a **San Jose Police Officer**. I/We also understand that I/We are responsible for payment to the police officer from the time my guests arrive to the time we clean up and leave. Payment is to be made in cash, money order, or cashier's check, at the current rate of pay.

Applicant's signature: Alex Sh Date: 3/3/20

I/We understand have received the Community Center rules and regulations and I/We also understand that I/We are responsible for adhering to all rules and regulations.

Applicant's signature: Alex Sh Date: 3/3/20

Applicant's Initial in Each Box

ADS I/We have received and understand the Cancellation policy.

ADS I/We understand if the facility is not cleaned. I/We will not receive the Cleaning/Damage Deposit refund back.

ADS I/We are aware of any additional cleaning/Damage done to the facility and I/we will take full responsibility and will be charged and/or sent to the City's Collections Office.

ADS I/We understand the facility will not be opened until the exact time that is stated on the permit.

---

### SAVE HARMLESS AND INDEMNIFICATION AGREEMENT:

I/We, \_\_\_\_\_, hereby understand and agree to

**(Print or type full name of Participant/Organization)**

accept the risk of bodily injury and/or property damage which I/we may incur or cause a third party to incur as a result of my/our participation in any and all activities for which specific space has been reserved for specific times. This shall include, but not be limited to, assignment of time and space for regularly scheduled activities, sporadic use and one-time events. With this understanding, I/We further agree to indemnify, defend and save harmless the City of San Jose, its Boards, its commissions and their respective officers, agent and employees from and against any and all claims, losses, injuries, suits or judgments arising from or in connection with my/our function as a participant. I/We agree to this indemnification and save harmless for myself/ourselves, my/our successors, assigns, heirs, executors and administrators, and any other person or entities who/which may have claim based on my/our personal injuries and/or property damage. I/We further understand and agree that this save harmless and indemnification shall apply to any and all facilities that the City of San Jose may own and/or control.

Signature of Authorized Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Credit Card Info: Visa/MC/Discover#: \_\_\_\_\_ Exp Date: \_\_\_\_\_ Card Holder Signature: \_\_\_\_\_