



**WATER AND  
POWER**



**BURBANK WATER AND POWER (BWP) VISITOR FORM  
(For Non-Business Purposes)**

**Purpose of Visit:** BURBANK TOURNAMENT OF ROSES ASSOCIATION (BTORA)

**Visitor's Full Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Date & Time of Visit:** DECEMBER 26, 2025 – DECEMBER 31, 2025 (DECO. WEEK)

**Please select the area(s) you wish to access:**

☐ General Campus Area

☐ Event Space

☒ Other (Please specify): BWP AUXILIARY WAREHOUSE/BTORA ROSE PARADE FLOAT

**Emergency Contact Information:**

**Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Acknowledgment and Agreement:**

I understand and agree to the following conditions as part of my visit to the BWP campus:

1. **Limited Access:** I am granted temporary, non-exclusive access to certain areas of the campus solely for the purpose of my visit as described above. This access is subject to approval and may be revoked at any time by the City of Burbank for any reason.
2. **Visitor Duties:** I will comply with all applicable safety and security protocols established by the City of Burbank. I understand that my access to the designated areas may be subject to specific rules and regulations, including but not limited to:
  - Compliance with all City of Burbank ordinances.
  - Refraining from any illegal activities on campus.
  - Ensuring that I am not disturbing other persons or property.

3. **Release of Liability:** I understand that entering certain areas of the Burbank Water and Power campus may involve certain risks, including, but not limited to, physical harm. I waive and release the City of Burbank from any liability for injury, death, or damage to property resulting from my visit. I acknowledge that I am responsible for my actions and for ensuring the safety of myself and others in the campus areas I access.
4. **Indemnification:** I agree to indemnify, defend, and hold harmless the City of Burbank, its officials, employees, agents, and volunteers from any and all claims, liabilities, damages, or expenses arising from my visit, including injury to persons or property. This includes claims that may arise from my failure to follow applicable rules, laws, or regulations during my visit.
5. **Insurance:** I acknowledge that I am responsible for ensuring I have appropriate personal insurance coverage, if applicable, during my visit.
6. **Compliance with Terms:** I agree to abide by the terms outlined in this Visitor Form. I understand that failure to comply with the terms or any illegal activities may result in the immediate termination of my access to the campus and/or further legal actions.
7. **Dress Code Compliance:** I understand and agree to follow the dress code requirements while on the BWP campus, which include wearing appropriate attire for safety and security purposes. This may include but is not limited to, closed-toe shoes, long pants, and any other specific clothing or protective gear as required by the City of Burbank for access to certain areas of the campus. I acknowledge that failure to comply with these dress code requirements may result in the denial of access to the BWP campus.

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**Visitor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Visitor's Legal Guardian** (If applicable):

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_