



**FACILITY RENTAL APPLICATION**

**NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**ORGANIZATION:** \_\_\_\_\_

**DATE OF EVENT:** (1<sup>st</sup> Choice) \_\_\_\_\_ **TIME:** Start \_\_\_\_\_ End \_\_\_\_\_

(2<sup>nd</sup> Choice) \_\_\_\_\_ **TIME:** Start \_\_\_\_\_ End \_\_\_\_\_

**EVENT TYPE:** \_\_\_\_\_

**APPROX # OF ATTENDEES:** \_\_\_\_\_

Internal Office Use Only

ITEM	RATES	AMOUNT TOTAL
Facility Rental	\$50/hour	\$50 x ____ hours = \$ _____
Staffing	\$15/hour	\$15 x ____ hours = \$ _____
<b>TOTAL AMOUNT DUE</b>		\$ _____
Non-refundable Deposit	50% or \$100 (whichever is less)	\$ _____ (Due minimum of 1 week before event)
<b>BALANCE</b>		\$ _____ (Balance due on day of event minus deposit)

**STAFF** \_\_\_\_\_ **DEPOSIT PAID \$** \_\_\_\_\_ **FORM OF PMT** \_\_\_\_\_ **DATE** \_\_\_\_\_

**STAFF** \_\_\_\_\_ **BALANCE DUE \$** \_\_\_\_\_ **FORM OF PMT** \_\_\_\_\_ **DATE** \_\_\_\_\_



## FACILITY RENTAL AGREEMENT

Initial below:

1. \_\_\_\_\_ I, the lessee, am at least age 21 and agree to be present during the entire event and accept responsibility for all participants attending this event including personal injury, damage and/or loss of equipment.
2. \_\_\_\_\_ Hours of rental will be strictly observed. If time is extended beyond that specified, then it is understood that additional charges may be necessary. In addition, the area used must be clean and vacated by the end of agreed rental time including removal of all items. All garbage must be placed in garbage cans provided. The area should be left in the same condition as when you arrived.
3. \_\_\_\_\_ Absolutely NO ONE is allowed on any gym equipment at any time.
4. \_\_\_\_\_ The use of alcohol and/or tobacco is STRICTLY PROHIBITED at any Habersham County Parks & Recreation Department (HCPRD) facility.
5. \_\_\_\_\_ Maximum occupancy not to exceed 500 people.
6. \_\_\_\_\_ The deposit amount is due a minimum of one week before scheduled event. Balance is due on the day of event. There is a 3% convenience fee for all debit/credit card transactions. A \$37.00 fee will be assessed for returned checks.
7. \_\_\_\_\_ No sound system is provided. Lessee must provide own if needed.
8. \_\_\_\_\_ Tape, staples, glue, etc. are not allowed on any fixtures.
9. \_\_\_\_\_ Violation of this agreement may result in immediate closure of the activity and 100% forfeiture of rental fees and deposits.

## LIABILITY RELEASE WAIVER

I \_\_\_\_\_ certify that the information I have given is accurate. I have read the rules and regulations pertaining to the use of Habersham County Parks & Recreation facilities. [A] Lessee will be responsible for all injuries caused by such use. [B] Lessee shall be responsible for reimbursing the County for any loss or damage to the County property caused by such use. [C] In consideration of participation as specified at location shown above dates and times, lessee does hereby release and hold harmless the Habersham County Parks & Recreation Department from any and all liability or claims for damage or injury of person or property of the undersigned due to lessee's use of said facility, by reason of any act or omission by the Habersham County Parks & Recreation Department, or any of its officers, agents or employees or the condition of its property.

**APPLICANT NAME (PRINT):** \_\_\_\_\_

**APPLICANT SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_