

REMINDER: A COMPLETE AGREEMENT, DEPOSIT & RENTAL FEES MUST BE SUBMITTED TO THIS DEPARTMENT 15 WORKDAYS (THREE WEEKS) IN ADVANCE OF THE REQUESTED DATES.

General James F. Fretterd Community Center
107 South 4th Street Denton, MD 21629 410-479-8120
Facility Use Agreement

Name _____ Today's Date _____

Address _____ City/State/ Zip _____

Home Phone _____ Work _____ Cell _____

Email address _____

Organization _____ Contact Name _____

Are you a Non-Profit or Civic Organization? Yes ___ No ___ Community Recognition Group? Yes ___ No ___

Caroline County Recreation & Parks retains the right to cancel and refund any approved reservation if the room reserved is required for an official County or Recreation Department program or event.

PLEASE NOTE: Applicants must provide a valid driver's license and be at least 21 years old.

Check One:	Facilities Requested	Public Use Rates for two hours as a reference point. See Building Use Policy for Complete Schedule of Fees		
		Weekday	Evening & weekend	Security Deposit*
	Gymnasium	50	95	150
	Activity Room 104	20	65	50
	Activity Room 113	20	65	50
	Activity Room 204	20	65	50
	Gym & Activity Room: _____ (specify)	70	115	150
	Activity Rooms _____ & _____ (specify)	40	130	100
	Gym & 3 Activity Rooms	90	155	150

* Security Deposit may vary dependent upon proposed use and duration

Description of Event _____ If a dance, what is the age/grade range? _____

Event Dates _____ Day of Week: Su M T W Th F Sa

Time Event Starts _____ Time Event Ends _____ Expected Attendance _____

Please note that set-up and clean-up times should be included in time frame requested for facility use.

Tables: No ___ Yes ___ How Many? _____ *No tables or chairs are allowed on the

Chairs: No ___ Yes ___ How Many? _____ gym floor without carpet.

The department has a limited supply available. A list of local companies for table and chair rental is available upon request.

Have you rented space at the Community Center before: Yes ___ No ___

Are you charging admission? Yes ___ No ___ If yes, who benefits from the fee: _____

Are you using a caterer? Yes ___ No ___ If yes, name the vendor _____

License # _____

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Will you be having a band? No ___ Yes ___ Name and phone of band _____

Will you be having a DJ? No ___ Yes ___ Name and phone of DJ _____

Will there be pre-event advertising? No ___ Yes ___ If yes, where? _____

Do you wish to place additional signage on the Community Center grounds for your event? No ___ Yes ___

RULES AND REGULATIONS: *Review and Initial each statement*

I understand **my responsibility to follow Community Center Policies** as a “Contractor” and pledge to review these policies prior to my scheduled use of the building. A copy of the Community Center Building Use Policies (dated December 2008/amended 2009, 2010, 2011) has been provided to me.

INITIAL HERE: _____

Cancellations of this agreement must be received three (3) business days prior to the event in order to receive a full refund. I understand the Department will contact me within five workdays of the date of my submission of this application (as noted on the FUA) to confirm the application details and review any questions.

INITIAL HERE: _____

I have provided a copy of my driver’s license and **understand that the security deposit, rental fees, and a signed liability waiver and/or insurance certificate specifying Caroline County as additional insured** must be submitted to the Department **three(3) weeks prior to the first date** of use requested on this application. Failure to meet this deadline cancels this facility Use Agreement.

INITIAL HERE: _____

I understand that parking in the surrounding church **parking lot is generally permitted except on Sundays** from 9:00 a.m. to 1:00 p.m.

INITIAL HERE: _____

I understand that my guests and my own **access to the Community center is restricted to the areas specified on the FUA**, that set-up and take-down must be completed within the timeframe noted on this application and that the activities cannot vary from the activity function stated on this application.

INITIAL HERE: _____

I understand that this is a **non-smoking facility** and that alcohol consumption is permitted only by special-use exemption through the Caroline County Commissioners or their designee.

INITIAL HERE: _____

I understand that if the event proposed is likely to **attract more than 100 people and/or a public admission fee is charged**, I may be required by the department to provide at my expense security via **local law enforcement** for the duration of my event.

INITIAL HERE: _____

I understand if I am **selling food concessions** as a part of my event that I must secure a **Temporary Food Service** permit three (3) weeks prior to the scheduled use. The permit is available through the Caroline County Environmental Health Department.

INITIAL HERE: _____

I understand that the use of **the gym is restricted to soft-soled shoes** and that non-athletic use of the gym is permitted with a floor covering provided and installed by the department for an additional fee.

INITIAL HERE: _____

I understand I am **responsible for the clean-up of the facility** within each period of contracted use including trash removal, sweeping and/or vacuuming. Failure to complete this will indicate a forfeit of the security deposit and may jeopardize Department approval of future Facility Use Agreement requests. (see page 7 of Building Use Policy)

INITIAL HERE: _____

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As the applicant for the use of the General James F. Fretterd Community Center, I certify for myself and on behalf of the organization I represent to assume responsibility for the building and grounds leased by this application, to follow the building policy rules and to be responsible for any property damage that occurs as a result of facility use.

I further agree to indemnify and hold harmless Caroline County and its employees from any and all liability claims, and judgments, including attorney's fees and court costs, resulting from the rental pursuant to this contract and further agree to provide notice of any claims made against either applicant or Caroline County immediately upon receipt through written notification to the Director of Caroline County Recreation and Parks.

I have read the rules and policies included with this application and I agree to abide by them.

Signature of Applicant

Date

Printed Name and Organization Represented

To be completed by Recreation & Parks Department

Submitted on
Date _____
Time: _____
Initials _____

Copy of Applicant's valid driver's license attached _____

Non-Profit _____ Private/For Profit _____ Date Insurance Certificate Received _____

FEE PAYMENT RECORD:

Rental Costs per 1 or 2 hour(s): _____ X # of hours _____ = _____

Security Deposit: Cash ___ Check ___ Credit Card ___ = _____

Carpet installation: (\$75/installation) = _____

Total = _____

Date Customer Contacted: _____ Date Payment Received: _____ Form of payment: Check #: _____

Cash: _____

Credit Card: _____

Receipt Provided: _____

Facility Supervisor _____

Carpet laid (date) _____

Carpet rolled up (date) _____

Security Required: ___ Yes ___ No

Faxed notification received _____

Deposit refund requested: _____

Initials of Administrative Staff _____ Date

Signature of Management Associate _____ Date

Signature of Department Director of Designee _____ Date

Signature of Parks and Facility Division Chief _____ Date