

Parks and Recreation Facility Rental Application



Staff taking application Appli	ication Date
Facility Information	
Facility Requested: Community CenterPompey Park Pompey Pool To Catherine Strong Park Delray Swim Club	een CenterVeterans Park
Name of Event: Room Reque	ested:
Event Date(s): Time:	AM / PM to: AM / PM Include set-up and clean-up
Contact Information	
Name Organization/Program Nam	ne
Address	
	Zip, State
Day of Event Contact Name/Number:	
Event Information	
Please check which best describes the purpose of your event:	
Meeting Church Banquet Wedding Concert Baby Shower Other (please explain)	
Estimated Attendance # of Youth 18 and Under 1 chaperone (21 years or older) required	ed per 10 youth. Must provide names of chaperones
Will wrist bands be distributed and monitored to limit attendance to the above (Security may be required at applicant's expense)	estimate? Yes No
If tables and chairs are needed, please list quantities below:	
Long Tables Chairs Round Tables	s (Pompey Park only)
Quantity Quantity	Quantity
Additional Info	
Will your event have amplified music? If amplified music is used a noise waiver must be obtained and provided prior to the event in th	YesNo vent.
Is organization non-profit/ tax exempt? If yes, must attach copy of 501(c) (3) status/ tax exempt certificate	Yes No
Will you need the kitchen for prep and warming food? No cooking is permitted in the kitchen	Yes No
Will your event have decorations? If yes, please describe:	Yes No
Will admission be charged? Yes No If yes, how m Must have approval from Director of Parks and Recreation	uch?

	Schedule of Fees and Charges:		
	†		
Single Room	\$30.00/3hr (3 hour min)		
2 – Way Room	\$60.00/3hr (3 hour min)		
3 – Way Room or Teen Center	\$90.00/3hr (3 hour min)		
Kitchen (Prep & Warming Only)	\$30.00/3hr (3 hour min)		
Additional Hours	\$20.00 (per hour)	\$20 xhours	
HOA's/ Civic/Clubs/ETC.	\$10.00 (per meeting/room)	\$10 x # meeting/rooms	
Gymnasium			
Gym – No admission fee	\$100.00/ hour	\$100 x hours	
Gym – With admission fee	\$1,000 flat rate	\$1000 x days	
Gymnasium/Multi-Day Event - W	<u>Veekends</u>		
Half Day Event (6 or less hours)	\$500/ day	\$500 x days	
Full Day Event (Over 6 hours)	\$1,000/ day	\$1000 x days	
Skate Park			
Skate Park – No admission fee	\$45.00/hour	\$45 xhours	
Skate Park – With admission fee	\$300.00 flat rate	\$300 x days	
Pool Rental			
Pool – price includes 2 lifeguards (2 hour minimum - Up to 50 guests)	\$100.00/hour	\$100 x hours	
Additional Hours	\$35.00/hour	\$35 x hours	
Additional Lifeguard	\$25.00/hour	\$25 x hours	
Supervisor Fee	\$30.00/hour	\$30 x hours	
Additional Staff Fee	\$30.00/hour	\$30 x hours	
Security Deposit \$200 (Deposit \$200 Security Deposit for facility rentals a			
		Sub-Total	
	Less 50% for	non-profits, if applicable	
		7% Tax	
		Deposit	
		TOTAL	

City of Delray Beach Parks and Recreation Facility Rental

Rules and Regulations

- 1. All rental fees and security deposit must be paid in full once application is approved. Reservation is **not** confirmed until full payment is received.
- 2. Security deposit is returned post event once staff has determined there is no damage and space has been left clean and free of debris. Security deposit is sent via check to the name and address listed on the application. Deposits may take up to 30 business days.
- 3. Cancellations must be in writing no later than 48 hours prior to the scheduled event date.
- 4. If event security is deemed necessary by staff, costs will be at the applicant's expense and responsibility. You must contact Extra Duty Solutions at 561-501-1057 or fax 203-702-3991. You may also email Adam Bryan at abryan@extradutysolutions.com.
- 5. A certificate of insurance may be required for some programs or events with the City of Delray Beach listed as additional insured.
- 6. Non-Profit 501 (c) (3) Organizations must provide proof of status at time of application to qualify for non-profit discounted rates. A copy of the organization's current non-profit status and tax-exempt certificate must be provided, and checks or credit card must be in the name of the organization in order to qualify. Please note that tax exempt status does not receive discounts only tax exemption.
- 7. Any misrepresentation on the application, regardless of intent, shall result in cancellation of the event, with no refunds given.
- 8. All decorations or products brought in for the event must be pre-approved by the Site Supervisor. All items brought on the premises must be completely removed by applicant from the premises in order for security deposit(s) to be returned. Note: Confetti is not allowed on facility grounds.
- 9. Event time must include set-up and break-down or extra time will be charged. All patrons must be off the premises at the time listed on the application or extra rental fees will apply and deposit will be forfeited.
- 10. No alcohol, pets, or smoking are allowed on the premises as well as prohibited or illegal items.
- 11. Any charges incurred by the City because of neglect, damage, or failing to adhere to all rules and regulations by the applicant or their guests, will be charged to the renter/applicant, in addition to forfeiting the security deposit.
- 12. The City of Delray Beach, at its discretion, may cancel the use requested by applicant. Such notice of cancellation, whether written or oral, shall be given to the contact person no later than 48 hours prior to the scheduled event. However, unforeseen circumstances that necessitate the need to cancel the event with less than 48 hours. In those instances, the City will refund any money paid prior to cancellation. Cancellation by applicant with less than 48 hours notice will result in loss of security deposit.
- 13. The City of Delray Beach will not be responsible for any lost or stolen items.
- 14. City staff will not sign for any items that have been rented by applicant or delivered for the event.
- 15. Parking for the event will not overflow into the street or onto private, unauthorized parking areas.

I have read each of the above stated rules and agr Beach Parks and Recreation Department, as well	ee to abide by all rules and regulations as set forth by the City of Delray as the Ordinances of the City of Delray Beach.
Applicant Signature	Date

Release Waiver

I, the undersigned, intending to be legally bound, do hereby for myself, family, guardians, charge/charges, heirs, executors and administrators, waive and release any and all rights and claims for damages, which I/we may have against the City of Delray Beach, their representatives, successors and employees for any injuries which I/we may suffer in connection with my/our use of this facility. At various times the City of Delray Beach videotapes and photographs events to be submitted to the local media. By using this facility, I/we hereby authorize the City of Delray Beach to reproduce, copy, exhibit, publish, broadcast, or distribute any and all such tapes or photographs. I have read the above and understand the rules and regulations of the City of Delray Beach that have been made available to me.

Refund Policy

An applicant can request a refund 48 hours prior to scheduled event date. The request must be made in writing. If a cancellation occurs within 48 hours of a scheduled rental, fees and deposit will be forfeited. All refunds are sent via mail and may take up to 30 days. If a security deposit is paid by check, refunds will only be sent after the check has cleared the bank.

Signature

I have read the above and understand the rules and regulations of the City of Delray Beach Facility Rental Application that have been made available to me.

Applicant Signature	Date	
	Facility Contact Information	1
Community Center	Delray Swim Club	Pompey Park
50 NW 1st Avenue	2350 Jaeger Drive	1101 NW 2 nd Street
(561) 243-7250	(561) 243-7358	(561) 243-7356
Pompey Park Pool	505 Teen Center and	Veterans Park
1101 NW 2 nd Street	Hobbit Skate Park	802 NE 1st Street
(561) 243-7358	505 SE 5 th Avenue (561) 243-7158	(561) 243-7350
*Please contact facility for their hours	of operation	
Email from Risk Management Copy of certificate of insurance	approving the Certificate of Insurance eattached	
Date Deposit Paid:	Rec Trac #:	
Date Total Paid:	Rec Trac #:	
Authorized by:	Date: _	
(Recreation Superviso	or)	
Deposit Refund Request Date:	Rec Trac #:	
Authorized by:	Date:	
(Recreation Supervisor)		