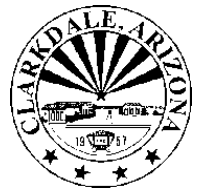


APPLICATION FOR FACILITY USE

Town of Clarkdale - Community Services Department
 39 N. Ninth Street • PO Box 308 • Clarkdale, AZ 86324
 Phone 928-639-2460 • Fax 928-639-2480



| | | |
|---|--|---------------------------------------|
| Date of Application: | | |
| Applications must be submitted with a Holding Deposit to finalize reservation. Holding Deposits: Events with NO ALCOHOL: \$300.00 / Events with ALCOHOL: \$800.00 / Events at Gazebo: \$50.00 | | |
| Section 1 - Applicant Information | | |
| Name of Applicant/Organizer <i>(must be on site during event)</i> | | |
| Name of Organization <i>(if applicable)</i> | | |
| Type of User: <input type="checkbox"/> Non-Resident <input type="checkbox"/> Resident <input type="checkbox"/> Commercial/For-Profit <input type="checkbox"/> Non-Profit, 501c #: _____ <input type="checkbox"/> Governmental/Public Agency <input type="checkbox"/> Town of Clarkdale Staff | | |
| Applicant Contact Phone: Email: | Secondary Event Contact: Name: Phone: | |
| Mailing Address | Physical Address: | |
| Section 2 - Event Information | | |
| Applicant requests use of the following facility: <i>(check all that apply)</i> | | |
| <input type="checkbox"/> Auditorium <input type="checkbox"/> Ladies' Lounge/Kitchen <input type="checkbox"/> Town Hall Parking Lot <input type="checkbox"/> Clubhouse View Deck <input type="checkbox"/> Men's Lounge <input type="checkbox"/> Town Park Gazebo <input type="checkbox"/> Centennial Plaza | | |
| Date(s) of Facility Use (include set-up and take-down time) → | Rental Start Date | Rental End Date |
| Date and Time of EVENT <i>(not including set-up/take-down)</i> ____ / ____ / ____ _____ am/pm <i>until</i> _____ am/pm | Rental Start Time _____ am/pm | Rental End Time _____ am/pm |
| Type of Use: <i>(Applications for Types of Use identified below with an * must be submitted a minimum of 60 days prior to the date of use.)</i> <input type="checkbox"/> Meeting or Educational Program <input type="checkbox"/> Activity/Event where NO profit, financial gain, donation, or contribution will be realized (NO ALCOHOL) <input type="checkbox"/> Activity/Event attempting to realize profit, financial gain, donation, or contribution* <input type="checkbox"/> Activity Event WITH ALCOHOL* | | |
| Brief Description of Event | Anticipated Number of Attendees: | |
| Will there be an admission charge? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list all price categories here: | | |

| | |
|---|--|
| <p>Will food be served?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>If yes, will the food be provided by a vendor/caterer? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please list all vendor(s)/caterer(s) here. (Also, see Section 4 Insurance Requirements)</p> |
| <p>Will there be decorations?</p> | <p><input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please describe:</p> |
| <p>Will there be amplified sound?</p> | <p><input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please describe:</p> |
| <p>Will the event include tents or canopies?</p> | <p><input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list number of tents with location and weighting method (stakes not permitted)</p> |
| <p>Will any outdoor electricity be required?</p> | <p><input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please list electric location and include amperage requirements. Outdoor electric must be requested to ensure access is enabled.</p> |
| <p>Does the Applicant request permission/assistance from the Town of Clarkdale for any of the following?</p> <p><input type="checkbox"/> Street Closures <input type="checkbox"/> Off Street Parking <input type="checkbox"/> Parking Plan</p> <p><input type="checkbox"/> Traffic Control Plan <input type="checkbox"/> On Street Parking <input type="checkbox"/> On-Site Obstructions <input type="checkbox"/> Non-Applicable</p> | |
| <p>Equipment or services requested (contingent upon availability)</p> <p># of chairs _____ # of tables _____</p> <p>Other:</p> | |

Section 3 - Alcohol

(A State Liquor License may be required)

Will there be alcohol at the event? No Yes If *no*, continue to Section 4. If *yes*, complete remainder of Section 3.

Date(s) and time(s) alcohol will be served:

Date: _____ / _____ / _____

From: _____ am/pm To: _____ am/pm

What type of alcohol will be served? (*i.e. beer, wine, spirits, etc.*)

Will alcohol be given away? No Yes

Will alcohol be sold? No Yes

Who will be purchasing the alcohol and where is the alcohol being purchased?

Who will be serving the alcohol?

Is a bartending service being used? No Yes

(See Section 4 Insurance Requirements)

Name of company:

Is alcohol being provided and served by a vendor? No Yes If *yes*, please list all vendor(s).

(See Section 4 Insurance Requirements)

Have the alcohol servers received training in sale/service of alcoholic beverages?

No Yes

If *yes*, when and where?

Will the servers be professionally supervised?

No Yes

Please describe what control measures you will take to ensure minors are not served, and how you will define areas in which alcohol is not allowed (signage available upon request).

(*i.e. wristbands or stamps. Disclaimer: renters will be held liable for minor consumption during facility rental*)

If applicable, which type of license will be used for the event?

Special Event Liquor License

Extension of Premise (existing liquor license holders only)

Who will be obtaining the liquor license?

Who will be obtaining liquor liability insurance?

IMPORTANT NOTICES REGARDING ALCOHOL SERVICE:

Renters will be required to cover the security cost for Clarkdale Police Officer(s) to be on site during alcohol service (view details within Facility Rental Information Packet).

Alcohol must be served in clear plastic cups.

Alcohol may only be consumed within permitted areas of the facility.

Renters are required to follow the alcohol service details as provided within Section 3 of this application. Events that do not follow the details provided within this application may be subject to cancellation or shut-down.

Section 4 - Insurance Requirements

The Town of Clarkdale has established insurance requirements for those facility users, vendors and contractors entering into agreements with the Town for the purpose of special events and activities. Before commencing use or services under an agreement with the Town of Clarkdale a certificate of insurance that complies with the requirements referenced below must be furnished.

All facility use applicants shall name the Town of Clarkdale as an Additional Insured. The applicant shall obtain Certificates of Insurance (COI's) from all vendors participating in this event unless covered under applicant's insurance policy. Vendors must comply with all requirements listed in this section. Complete and accurate certificates must be received by the Town a minimum of thirty (30) days prior to the date of use. If the certificate of insurance is not received within thirty (30) days prior to the event, the event may be cancelled. An additional Liquor Liability policy provided by the applicant will be required prior to events at which authorization for serving alcohol has been requested for and approved.

All activities/events with alcohol: Prior to the sale, storage, use, donation, or giving away of alcoholic beverages on or from the subject premises by applicant or any other person, applicant, at its own expense, shall obtain a policy or policies of insurance issued by a responsible carrier and in a form acceptable to the Town saving harmless and protecting the Town of Clarkdale and the premises against any and all damages, claims, liens, judgments, expenses and costs arising under any present or future law, statute, or ordinance of the State of Arizona of other governmental authority having jurisdiction on the premises, by reason of any such storage, sale, use or disposition of alcoholic beverages on or from the premises.

The certificate must show:

1. Applicant named as "Insured".
2. The Town of Clarkdale named as "Additional Insured".
3. The Town of Clarkdale listed as "Certificate Holder".
4. The Town of Clarkdale shall be notified at least thirty (30) days prior to cancellation or alteration of any insurance coverage. A 10-day notice of cancellation for non-payment of premium.
5. General Liability coverage reflecting the required insurance limits listed below under "Insurance Limits".
6. Specific date(s) and location of event. This shall include the entire term of use as specified in Section 2 Date(s) of Use.
7. Endorsement.

INSURANCE LIMITS:

General Liability - \$1,000,000 each occurrence
Liquor Liability - \$1,000,000 each occurrence

Section 5 - Certification

I hereby certify that the statements made in this application are true and complete to the best of my knowledge, and that I am authorized to execute the application. Intentional omissions or falsification of information is sufficient grounds for denial of the application.

Dated this _____ day of _____, 20_____.

Signature of Applicant (or Applicant's Authorized Agent)

Title, and Organization, if applicable

FACILITY RENTAL AGREEMENT

Renters unable to pay total fees by deadline or follow Facility Rental Agreement regulations are subject to reservation cancellation by the Town of Clarkdale.

INITIAL: _____

In case of emergency or reasons beyond the Town's control, the Town of Clarkdale reserves the right to cancel the scheduled event prior to use without liability. Facilities may be forcibly closed due to mechanical, chemical, or environmental issues. Refunds will be made if the cancellation is necessary, and refund requests will be assessed on a situational basis.

INITIAL: _____

The Town of Clarkdale reserves the right to require event Support Staff presence at any event. This requirement will be determined on a case-by-case basis, and the renter will be responsible for covering any associated hourly costs that are determined within the current Town Fee Schedule.

INITIAL: _____

There is a 4-hour minimum for Clubhouse rentals. As a renter, you must agree that even if an event will not use 4 full hours, the total cost of 4 full hours must be paid to the Town of Clarkdale.

INITIAL: _____

The person who signs this agreement is the responsible party, and is required to inform everyone associated with the event of the Facility Use Policies and Procedures.

INITIAL: _____

The Holding Deposit will be returned to the renter in the form of a check, and will be made out to the Applicant listed in Section 1 of this application unless otherwise specified to Town Staff. Checks will be mailed to the address listed in Section 1 within 10-20 business days following the facility rental.

INITIAL: _____

I, _____(print name), representing
_____(organization), have read and agreed to the Policies and Procedures within the Town of Clarkdale's Facility Rental Information packet. I understand that I may be subject to event cancellation or withheld funds from the Holding Deposit if any of my responsibilities as a renter are not fulfilled.

Signature of Renter

Date

Town of Clarkdale Staff Approval

Date

TOWN USE ONLY

| | | | |
|--------------------------|-------------------------------------|----------|----------------|
| Application Received by: | Holding Deposit Amount Received: | Paid by: | Date Received: |
|--------------------------|-------------------------------------|----------|----------------|

Notes:

If applicant is representing an organization at the time of Application/Deposit, the Holding Deposit Refund will be issued to the organization. If the Deposit Refund needs to be made out to another name/address than listed on the application, provide that here: