



**CITY OF GREENACRES
LEISURE SERVICES DEPARTMENT
FACILITY RENTAL APPLICATION AND AGREEMENT**

RENTER/ORGANIZATION: _____		
ADDRESS: _____		
(Street)	(City/State)	(Zip)
PRIMARY TEL. NO.: _____	ALT. PHONE: _____	EMAIL: _____
ALTERNATE CONTACT PERSON: _____		TELEPHONE NO.: _____
Tax-Exempt YES <input type="checkbox"/> NO <input type="checkbox"/>		Non-profit/Long Term YES <input type="checkbox"/> NO <input type="checkbox"/>
		Renter's Initials
Non-profit agencies: Agencies must submit a copy of the organization's Internal Revenue Service 501c(3) certificate. The rental must be made in the organization's name as stated on the 501c(3).		
Sales Tax: All Renters must pay Florida sales tax or provide the City with a Florida sales tax exempt certificate DR-14 form. The rental must be made in the organization's name as stated on the DR-14.		

FACILITY REQUESTED (Indicate specific name and location):					
DATE(s) (Month/Day/Year)		START TIME* A.M. / P.M. <i>(include setup)</i>			
END DATE <i>(if long-term)</i> (Month/Day/Year)		END TIME* A.M. / P.M. <i>(include cleanup)</i>			
ACTIVITY/PURPOSE:			APPROX. ATTENDANCE:		
BOUNCE HOUSE/AMUSEMENT VENDOR: YES <input type="checkbox"/> NO <input type="checkbox"/>			TELEPHONE NO.:		
RENTAL COMPANY:					
LONG TERM RENTALS: <i>If this is a long term rental – defined as a minimum of eight (8) rentals within one-12 month period, please continue and provide the information below.</i>					
CLASS FREQUENCY:	Weekly <input type="checkbox"/>	Bi-Weekly <input type="checkbox"/>	Monthly <input type="checkbox"/>	Other <input type="checkbox"/>	_____

FACILITY HOURS:		Renter's Initials
	Community Center Operating Hours: 9:00 a.m. - 9:00 p.m., Monday through Thursday; 9:00 a.m. - 6:00 p.m., Friday; and 9:00 a.m. - 1:00 p.m., Saturday; open Sundays for rentals only. <i>(Additional rental time may be purchased dependant on availability of staff coverage for an extra charge of \$30 per hour, or \$50 flat fee for the Banquet Hall. No rentals beyond 12 a.m./midnight).</i>	
	Pavilion Rental Hours: 10:30 a.m. - 8:00 p.m. (Sound amplification is prohibited at Freedom Park.)	
	Athletic Field Rental Hours: 9:00 a.m. - 9:45 p.m. (Lights will be programmed no later than 9:45 p.m.)	

RULES & REGULATIONS:		Renter's Initials
	Rental fees: Payment in full must be received at the time of reservation. If renter is claiming non-profit or tax exempt status, payment must be made by check or credit card in the organization's name.	
	Refundable Security Deposit: A refundable security deposit is required at the time of reservation and will be deposited immediately into the City's bank account. Security deposit refunds are processed after the appropriate paperwork has been received by the Department of Finance and issued within 7 –14 business days after the event. If a security deposit was made by check, the Finance Department will issue a refund after the check has cleared the bank.	
	Responsibility: Renter is responsible for all parties/vendors attending. All participants are expected to conduct themselves appropriately at all times. Disrespect for other facility users or employees, damage to pavilion, failure to clean-up, non-compliance, or failure to vacate in a timely manner will result in the renter being asked to leave the facility, forfeiture of security deposit, and/or loss of future rental privileges.	
	Cancellation Policy: If the rental is cancelled beyond two (2) calendar days prior to the scheduled rental, a full refund less a 15% administrative fee will be refunded. Any cancellation on the day preceding the event or on the day of the event will result in a 100% forfeiture of all fees paid.	
	The City reserves the right to cancel, postpone, or delay any athletic league function or practice due to inclement weather, or any other factors that may impair the field, or the safety of the participants. If the rental is cancelled by the City, 100% of the fees paid will be refunded. Refunds are processed by the Finance Department upon receipt of necessary paperwork completed by staff. Refund is then issued within 7 –14 business days. If payment was made by check, the check must clear the bank before the Finance Department will issue a refund.	
	General Liability Insurance: A Certificate of Insurance in the amount of \$1,000,000 naming the City of Greenacres as an Additional Insured is required for Banquet rentals with alcohol, bounce houses, concession stand usage or other activities as determined by the City.	
	Large Events: All large rental events that include over 200 people in attendance require a Temporary Use Permit. Such events may also require an Extra Duty Police Service Permit Application for the Palm Beach Sheriff's Office. Renter is to contact PBSO at (561) 687-6817 or 687-6818 to coordinate security measures and all additional costs related to Extra Duty Services.	
	Renter is required to have a copy of the receipt and permit with them on day of rental(s).	
	Permission to serve or consume alcohol is allowed with rental of the Banquet Hall only at the Community Center. A PBSO contracted "Extra Duty" Deputy is required, and must be present for entire length of event.	
	Catering and/or Bartender Agreement(s) must be completed two (2) weeks prior to event.	
	Commercial sales, activities and private fundraising activities are prohibited.	
	Neither the Renter, nor anyone in the Renter's party, is permitted in any area other than that which is designated in the agreement.	
	Renter is to conduct pre-rental inspection and record any damage(s) found to the City facility to be rented. City Staff will conduct pre-rental inspection for-indoor facility rentals. Post-rental inspection is completed on all rentals by City Staff.	
	Loading/unloading must take place from the parking lot; no parking on the grass, even for temporary loading/unloading.	
	All decorations must be free standing; no tape, tacks, nails or staples. Zip ties, balloon strings or other fasteners are not to be left on pavilion or classrooms. No confetti, tents with stakes, petting zoos or portable grills allowed.	
Renters and participants are not to perform field maintenance to any field without authorization from the City. All vehicles must be kept to designated roadways and shall not be driven on any turf or clay areas.		
For all indoor rentals, the standard temperature setting for air-conditioning is 72 degrees and 68 degrees for heat; adjustments may be two (2) degrees above or below the standard setting.		
Prior to vacating the premises, all trash must be removed and deposited in receptacles, and tables cleaned. (The City of Greenacres is not responsible for food or materials left at the conclusion of the event. These items will be disposed of at the discretion of the City.)		

RELEASE WAIVER	
I, the undersigned, intending to be legally bound, do hereby for myself, family, guardians, child/children, heirs, executors and administrators, waive and release any and all rights and claims to damages, which I/we may have against the City of Greenacres, its representatives, successors and employers for any injuries which I/we may suffer in connection with my/our use of this facility. I have read the Agreement, and understand and hereby agree to the City of Greenacres Facility Rules and Regulations that have been made available to me and that apply to this Agreement.	
Renter: <i>(signature)</i>	Date:
Witness: <i>(City Staff signature & title)</i>	Date:
Leisure Services Director: <i>(signature required ONLY with large rentals)</i>	Date:

CITY USE ONLY					
Application Received:	Date:	Time:	By Staff (initial):	Security Deposit Paid: YES <input type="checkbox"/> NO <input type="checkbox"/>	Total Fees Paid: \$
Certificate of Liability Insurance Required?	YES <input type="checkbox"/> NO <input type="checkbox"/>		Ins. Co. Contact Name:		
			Telephone Number:		
Temporary Use Permit Required:	YES <input type="checkbox"/> NO <input type="checkbox"/>		Notes:		
PBSO Extra Duty Required:	YES <input type="checkbox"/> NO <input type="checkbox"/>		Notes:		
Public Works Notified:	YES <input type="checkbox"/> NO <input type="checkbox"/>		Notes:		
Refund Form Completed:	YES <input type="checkbox"/> NO <input type="checkbox"/>		Notes:		

RENTAL INSPECTION:	Pre-Rental Inspection Completed By : _____ <i>(Required only with indoor rentals)</i> <i>City Staff Name</i>	
	Date:	Comments:
	Time:	
	Post-Rental Inspection Completed By : _____ <i>City Staff Name</i>	
	Date:	Comments:
	Time:	

Attachments: Banquet Facility Rental Details Sheet
Room Layout for set-up



**CITY OF GREENACRES
DEPARTMENT OF LEISURE SERVICES
REQUEST FOR REFUND**

DATE:	
REFUND TO BE ISSUED TO:	
NAME:	
ADDRESS:	
CITY, STATE, ZIP:	
TELEPHONE NO.:	
REASON FOR REFUND:	
<input type="checkbox"/> Security Deposit <input type="checkbox"/> Facility Rental Cancellation <input type="checkbox"/> Program <input type="checkbox"/> Other: _____	
<i>Comments (provide information such as program type, participant's name, rental facility, etc.):</i>	
REQUESTOR'S SIGNATURE: <i>(participant/renter/City employee)</i>	
FOR CITY USE ONLY:	
<i>Reviewed by:</i>	<i>Date:</i>
<i>Approved by Director of Leisure Services:</i>	<i>Date:</i>
<i>Amount Approved: \$</i>	<i>Refund processed:</i> <input type="checkbox"/> Credit Card <input type="checkbox"/> City Check <input type="checkbox"/> Less 15% Admin Fee
<i>HH#:</i>	
<i>Provide reason if full refund not granted:</i>	
<i>Verified by (Finance Dept):</i>	<i>Date:</i>