

WAKULLA COUNTY EXTENSION FACILITIES USE APPLICATION AND AGREEMENT

1. Person Requesting Us Name:	-	Phone #				
Address (city, state, zip):						
Driver's License Number:	dress:State of Issuance:Exp:					
2. Organization Name (E Address (city, state, zip): Tax ID#:						
Type of Applicant: Non-Pro	ofit Go	overnment Agency _	Private Pers	son or Entity:		
3. Facility requested (ch	eck applicable box	x):				
Imperial Arena	Concession	Gator OMR	Tupelo Rm 1	Magnolia Rm 3		
4. Date(s) Requested (SI Times Start: 5. Date(s) Requested (O	Time End:	Set-Up Time:_	All Ev	rents Need to End by 9pm		
6. Description of Event:						
7. Will you have inflatab	les (i.e. bounce he	ouse, water slide, e	etc)? 🗆 Yes	□ No		
8. Estimated Number of:	Participants	Vendors	Spectators	8		
IMPORTANT NOTE: amount of tables an responsibility of the	d chairs. Anythi	ing above the am	ount available tha			
9. Check appropriate bo	x: □ Required a	dmission 🛛 🛛 Re	quested donation	□ None		
10. Will there be vendors	s at the event? If	so, attach a list of ve	endor names, addres	ses, and phone numbers.		
11. How will event be ad	vertised or promo	oted (if applicable)	?			

All applicable fees must be paid no later than two (2) weeks prior to the date of event.

Deposit Paid: Receipt No.:	 Facility Use/Permit Fee: Receipt No.:	
Date:	 Date:	

Applicant Certification:

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I hereby certify and affirm that the above information, along with any additional forms, supplements, and attachments are true and correct. I understand that providing untrue or false statements in this Application/Agreement may result in the immediate denial or revocation of any authorization to use any Wakulla County Facilities.

I further certify and affirm that I have reviewed all of the attached Facility Use Agreement Terms and Conditions, Chapter 23 of the Wakulla County Code of Ordinances and agree to be bound by all such provisions. I understand that the Facility Use Agreement shall not be effective and approved until execution by an authorized representative of Wakulla County.

Applicant Name:		
Signature:	Date:	_
Approved by:		
County Representative:	Date:	_
Signature:	Title:	_

WAKULLA COUNTY FACILITY USE AGREEMENT TERMS AND CONDITIONS

1. Applicant shall be required to clean and return facility to the condition it was in prior to the use authorized by this agreement. In addition, any damages to the facility shall be the responsibility of Applicant. Applicant shall sweep or vacuum all floors, wipe all table and countertops, and discard all trash in the dumpsters, if available. If dumpsters are not available, trash must be discarded at a location determined by the Parks and Recreation Director. A failure to satisfactorily clean the facility or repair any damages shall result in forfeiture of the Applicant's deposit and may result in filing of a claim against Applicant's insurance or bond.

2. Alcoholic beverages are prohibited County facilities except as may be authorized in the County's Parks and Recreation Ordinance and as expressly approved by the Parks and Recreation Director. Smoking is prohibited inside of facilities. No illegal drugs or other illegal substances or activities shall be permitted in any County facility or on any County property. Any violation of this paragraph may result in forfeiture of the Applicant's deposit, and/or arrest and prosecution.

3. If required by the County, the Applicant shall hire at his own expense law enforcement officers for crowd control or security at events.

4. No admission charges or sale of items will be allowed unless listed in the Applicant's Use Agreement. If approved, Applicant shall be responsible for collection and payment of any applicable sales and other taxes.

5. Applicant shall be responsible for obtaining any necessary licenses and permits for the event, including any permits for provision of food.

6. The County reserves the right to cancel, postpone, or reschedule this event due to facility maintenance, inclement weather, public safety requirements, or other emergency. In the event the County must cancel the event, the Applicant's deposit and use fee shall be refunded in their entirety. If the Applicant cancels, they may be entitled to receive a refund of the deposit of 75% (the remaining 25% being kept by the County for review of the Application), and 100% of the use fee.

8. For events expected to have over 75 persons, Applicant shall, at its own expense, keep in force during the term of this agreement, insurance from an insurance company licensed in the State of Florida and rated "A" or better. Required insurance shall be evidenced by a certificate of insurance including: Comprehensive Liability Insurance with a minimum limit of \$1,000,000 per occurrence, combined single limit to include: Premises Personal Injury, Operations. The Wakulla County Board of County Commissioners and Wakulla County shall be listed as an additional insured on the certificate of insurance.

9. For events that will have any type of inflatable(s) (i.e. bounce house, water slide, etc.), Applicant shall provide proof of insurance that includes a minimum limit of \$1,000,000 for such inflatable(s) and list The Wakulla County Board of County Commissioners and Wakulla County as an additional insured on the certificate of insurance.

10. This Agreement shall be interpreted pursuant to the laws of the State of Florida and the parties further agree that the venue of any legal action concerning the Agreement will be in Wakulla County, Florida.

11. Upon execution, this Agreement shall be a legally enforceable contract and Applicant agrees to comply with all the terms and conditions set forth herein, and to all County ordinances and laws of the State of Florida.