

Attachment 8

Facility Rental Request

Please check one:

- This is a for-profit event. Organizers and/or vendors will be compensated through sales, admission, fees, etc.
- This is a non-profit event that will be open to local community members.
Is your non-profit located in the City of Edgewater (circle one)? YES NO
- This is a private event that will not be open to local community members.

Name & Description of Event:

How many participants and/or spectators do you expect? _____

Your Name: _____ **Date of Birth:** _____

Organization or Business: _____

Address (City, State, Zip Code): _____

Phone: _____ **Email Address:** _____

Which facility/facilities would you like to rent?

Civic Center

- Large Activity Room Small Activity Room 1st Floor Conference Room
- Gymnasium City Council Chambers

Citizens Park

- Softball Field Pavilion Horeshoe Pits
- Softball Restrooms Pavillion Restrooms Entire Park
- Softball Lights

Memorial Park

- Memorial Park

Orum House

- Orum House Community Garden



Desired Date or Dates: _____

Hours: _____ am pm TO _____ am pm

If multiple dates are being requested with different hours, please indicate that here:

Please indicate which supplemental goods and services will you need, including the number of each. Fees may apply for these services.

- | | | |
|--|---|---|
| <input type="checkbox"/> Traffic Cones _____ | <input type="checkbox"/> Transformers _____ | <input type="checkbox"/> Dumpster _____ |
| <input type="checkbox"/> Trash Cans _____ | <input type="checkbox"/> Trash Bags _____ | <input type="checkbox"/> Tables _____ |
| <input type="checkbox"/> Snow Fence _____ | <input type="checkbox"/> Barricades _____ | <input type="checkbox"/> Chairs _____ |
| <input type="checkbox"/> Field Lining _____ | <input type="checkbox"/> Sound System _____ | |

Please use this section for any specific requests pertaining to goods and services.

Please check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> My event will require road closures or traffic control. | <input type="checkbox"/> My event will include animals. |
| <input type="checkbox"/> My event will require use of the school parking lot. | <input type="checkbox"/> My event will include alcohol. |
| <input type="checkbox"/> My event will require additional security staff. | <input type="checkbox"/> My event will require tents. |
| <input type="checkbox"/> My event will require portable toilets. | <input type="checkbox"/> Food will be sold at my event. |
| <input type="checkbox"/> My event will require additional insurance. | <input type="checkbox"/> My event will include amplified sound. |
| <input type="checkbox"/> My event will require more than 120V power. | <input type="checkbox"/> My event will include inflatables. |

I understand that this is a request only, and that my reservation is not complete until this application has been approved, a permit agreement has been signed, and all deposits and fees are paid.

Signature _____

Date _____