



Warren County Hisey Park Event Rental Contract

Group Name: _____ Primary Contact Name: _____ Application Date: _____

Contact Information:

Primary Contact Email: _____ Secondary Contact Name: _____
Primary Contact Address: _____ Secondary Contact Email: _____
Secondary Contact Phone: _____
Primary Contact Phone: _____

Outing Date: _____ Arrival Time: _____ Number in Group: _____
Group Type: _____ Event Type: _____

(Example of types of events that will be allowed to rent space and/or serve alcohol: weddings, family picnics/reunions, company outings, fundraisers and concerts/festivals. Event approval is at the discretion of the Park Director)

This contract must be completed and signed by the contact person and returned to the Park Office. Event rental fees must be paid at the time the reservation is confirmed by the Park District. THE PARK DISTRICT RESERVES THE RIGHT TO ASSESS A CLEAN-UP FEE OF \$75 PER HOUR, AND/OR CHARGES FOR THE FULL COST OF REPAIRS AND LOST REVENUE DURING THE REPAIR PERIOD FOR ANY AND ALL DAMAGES INCURRED DURING THE CONTRACTED GROUP'S EVENT RENTAL PERIOD. (A reservation period consists of a 1 to 3 day period (Friday, Saturday & Sunday) Friday and Saturday 8:00 am to midnight and Sundays 8:00am until noon).

_____ (Initial when read)

Each individual signing this application further agrees to waive any and all claims for negligence against the Warren County Park District and its officers, directors and employees, and each such individual agrees to indemnify and hold the Warren County Park District and its officers, agents and employees harmless from any and all liability for property damage, personal injury or death or other claims of any nature whatsoever arising from the individual and group's use of Park property during the preparation for, duration of and clean-up after the event.

_____ (Initial when read)

Cancellation notice must be made in writing, and your event cannot be cancelled until the notice is received. Notices received more than 180 days (six months) prior to the event date will receive a 100% refund. Notices received more than 120 days (four months) but less than 180 days (six months) prior to the event date will only receive a 50% refund. Reservations cancelled less than 120 days (four months) prior to event date will not be refunded. All cancellations are subject to a \$25 processing fee.

_____ (Initial when read)

The contact person shall be personally liable for the full cost of any damage to Park property that occurs during the event period.

_____ (Initial when read)

If alcohol is being served, the guest must comply with applicable liquor laws. Beer, liquor and wine are permitted by reserving groups within reserved area only. If alcohol is being sold, in any manner, the guest is to contact the State for applicable liquor permit requirements. If a permit is required, the guest must provide the Warren County Park District in advance of the reservation with a copy of the permit and proof of liquor liability insurance naming Warren County Park District as an additional insured.

_____ (Initial when read)

An adult supervisor 25 years of age or older must accompany groups that include persons aged 15 and under at all times during the agreed upon rental period outlined below. Contact person (individual signing the agreement) must be 21 years of age or older.

_____ (Initial when read)

I have read and understand the Frequently Asked Questions/Answers, and Park District Rules and Policies and agree to be bound by said Rules and Policies.

_____ (Initial when read)

I have read and understand the above terms of agreement. I will be responsible for the conduct of the group, ensure that the group adheres to the Warren County Park District policies and will be personally liable for all expenses required to repair damage to Park facilities incurred during the agreed upon rental period specified above.

Signature of Contact/Responsible Person Date

FOR OFFICE USE ONLY

Rental Fee: **\$1,200.00**
Rental Fee Paid: _____ Rental Payment Method: _____ Rental Paid Date: _____
Damage Deposit: **\$300.00**
Deposit Paid: _____ Deposit Payment Method: _____ Deposit Paid Date: _____