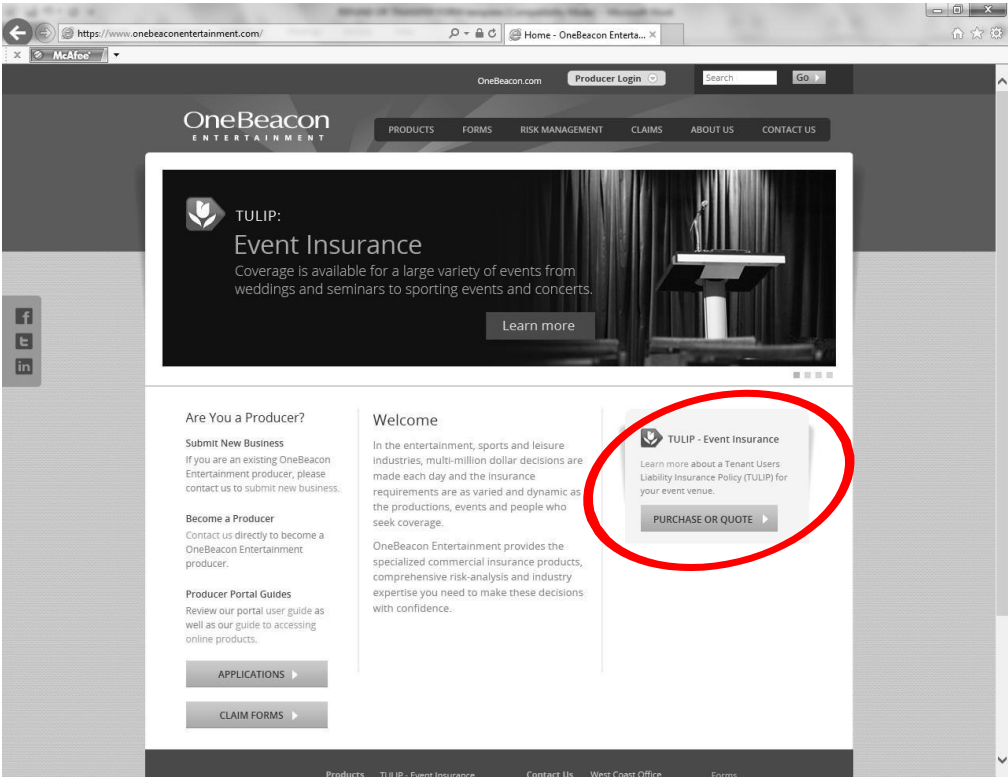


CORAL GABLES PARK FACILITY

RENTAL APPLICATION INFORMATION & STATUS Form

Thank you for choosing Coral Gables Park facilities for your rental. Please complete the included application fully including your event insurance and a credit card authorization form.

- All applications must be notarized on page 4. If you need notary services please schedule with the City Clerk’s office, Monday thru Friday between 8am and 5pm.
- Please submit all applications at least 7 days prior to your intended rental date to ensure timely approval.
- Rental insurance is offered through One Beacon Entertainment, through the Tenant Users Liability Insurance Policy (TULIP). Please follow the options on the screen to complete your insurance and print the certificate for submission with your application.



For Office Use Only

Action/Status	Date	Staff
Park Rental deposit paid & rental date reserved		
Application & Insurance received by staff		
Application Approved by Supervisor		
Application Approved by Director		
Park Rental fees paid		
Customer sent receipt & confirmation of rental		

Facility Rental Checklist

- ✓ Select Facility and Date (Note: dates are only considered “rented” when paperwork is received)
- ✓ Purchase and attached a copy of the Non-Refundable liability insurance through TULIP website found on page 3
 - If assistance is needed please contact TULIP at (800) 507-8414
 - Attendance on insurance must correlate to application attendance numbers and must not exceed park allowance
- ✓ Have page 4 of the rental application notarized
- ✓ Make sure names on all documents match
- ✓ Facility Rental Usage Policies portion must be initialed and **NOT** checked
- ✓ Turn in completed packet:
 - Facility Rental Application
 - Facility Rental Usage Policies
 - TULIP Insurance Document

***Applications must be submitted at least 7 days prior to event to allow for office approval.*



Permit #: _____

CITY OF CORAL GABLES FACILITY RENTAL PERMIT APPLICATION

Renter Information	<i>Legal Name of the Permit Applicant (Company or Individual):</i>		<i>Today's Date:</i>		
	<i>Contact Person for this Permit Application:</i>				
	<i>Contact Person Phone:</i>		<i>Contact Person Fax:</i>	<i>Contact Person Email:</i>	
	<i>Permit Applicant Address:</i>		<i>City:</i>	<i>State:</i>	<i>Zip:</i>
	<i>Permit Applicant Phone:</i>		<i>Permit Applicant Fax:</i>	<i>Permit Applicant Email:</i>	
	<p><i>Is the Contact Person an Officer of the Legal Entity?</i></p> <p><input type="checkbox"/> YES* <input type="checkbox"/> NO**</p> <p>* If Yes, attach verification from Sunbiz.org.</p> <p>** If NO, go to next question.</p>				
<p><i>Is the Contact Person an Authorized Agent of Applicant?</i></p> <p><input type="checkbox"/> YES* <input type="checkbox"/> NO**</p> <p>*If Yes, Contact Person (Authorized Agent) must provide the City with a Limited Power of Attorney evidencing that they are authorized to execute legally binding contracts on behalf of the permit applicant.</p> <p>**If No, then this Agreement must be executed (signed) by an Officer or Authorized Agent of the Legal Entity.</p>					
Rental/Event Information	<i>Facility Requested: (include room location if applicable)</i>		<i>Date(s) Requested:</i>		
	<i>Hours of Rental:</i>	<i>Set-up Time to Begin:</i>	<i>Clean Up Time to End:</i>		
	<i>Type of event to be held (i.e. family reunion, birthday party, wedding etc.):</i>				
	<i>Anticipated Attendance: (must be completed)</i>		<i>Admission Fee Charged?</i>		
		<input type="checkbox"/> YES <input type="checkbox"/> NO			

Indemnification:

For and in consideration of the City of Coral Gables consent to allow the Facility Rental Permit Applicant to use a city owned facility located within Miami-Dade County Florida, the Facility Applicant agrees as follows:

The Facility Rental Permit Applicant jointly and severally, hereby hold harmless, indemnify and defend the City of Coral Gables, its representatives, officers, agents, affiliates, employees, the administration and elected and appointed officials from and against all liability, suits, actions, claims, costs, expenses or demands (including, without limitation, suits, actions, claims, costs, expenses or demands resulting from death, personal injury and property damage) or expenses of every kind and character, including reasonable attorney's fees, costs and appeals, arising or resulting in whole or in part, as a result of any tort, intentional action, negligent acts or omissions on the part of the Facility Rental Permit Applicant or any of the contractors, subcontractors, participants and/or guests associated with the Facility Rental outlined in this application. This indemnification provision shall survive the termination of this contract and shall be in full force and effect beyond the term or termination of this contract, however, terminated. This indemnification provision includes claims made by the entitlement, if any, to immunity under section 440.11, Florida Statutes. Nothing contained herein shall be construed as a waiver of any immunity or limitation of liability the City may have under the doctrine of sovereign immunity of section §768.28, Florida Statutes.

I/We hereby acknowledge that a copy of the *Facility Rental Usage Policies* containing the rules and regulations for use of facilities owned and/or managed by the City of Coral Gables Parks and Recreation Department has been received and that I/We have read, understand and agree to abide by these rules & regulations governing the usage of the Facility being rented.

Authorized Signatory of the Permit Applicant or Authorized Agent

Date

Print Name of Authorized Signatory

Title of Authorized Signatory (if applicable)

Address

City

State

Zip Code

Subscribed and sworn to before me, this _____ day of _____ 20_____.

Notary Public State of Florida at Large

Approved by:

Department Director

Signature of Department Director

Date

City of Coral Gables Parks & Recreation

Facility Rental Usage Policies

I/We _____ hereby acknowledge that I have been given, have read and understand the Facility Rental Usage Policies for use of facilities owned and/or managed by the City of Coral Gables Parks and Recreation Department.

_____ I understand that a reservation is not confirmed or guaranteed until approved by the Director of Parks and Recreation, payment is received and the Facility Rental Permit has been executed.

_____ **I understand and agree that if I exceed the maximum allowed capacity for the facility being rented, including a pavilion rental, I will be asked to leave the premises immediately. If I fail to leave the premises when asked I understand that I can be removed by police escort.**

_____ I understand and agree that fraudulent representation of information provided on the Facility Rental Permit Application, including residency status, may result in immediate revocation of the Facility Rental Permit, forfeiture of all fees and denial of any future requests for a facility reservation.

_____ I understand and agree that I am responsible for the actions of my guests and myself. I understand and agree to ensure compliance and abide by the usage rules and policies, City regulations and ordinances or any federal, state or local rule, regulation, law and/or ordinance. Failure to abide by these rules etc. may result in the immediate termination of my Facility Rental Permit including forfeiture of all fees and immediate removal from the rented facility.

_____ I understand and agree that any duly authorized City of Coral Gables employee has the right at any time during my rental to enter any and all areas of the premises for the purpose of inspection.

_____ I understand and agree that I must be present at the rented facility for the duration of the event. My absence during the stated rental period may result in forfeiture of the security deposit and jeopardize any future reservations at a City owned/operated property.

_____ I understand and agree the Cancellation policy as it applies to my rental and my rental location.

_____ I understand and agree that I must be prompt in arriving and departing the facility. I further understand that the rental time frame, as it appears on the Facility Rental Permit Application, includes time for set-up, decorating and cleaning of the facility.

_____ I understand and agree to assume all responsibility for any damages done to the facility as a result of my usage and to report any damages immediately.

_____ I understand and agree to leave the premises in as good or better condition than which existed prior to my use and to clean the area as described in the rental usage policies.

- _____ I understand and agree that, with the exception of an after-hours rental, my rental of a facility does not restrict use of the facility by others.
- _____ I understand and agree that parking of vehicles is only allowed in designated parking areas; that no parking is allowed on grass or swale areas and that violators may be issued a parking citation if they choose to violate the parking regulations.
- _____ I understand and agree that equipment, outside entertainment and/or activities must be approved by the Facility Supervisor in advance of the rental date and that these providers must meet the minimum insurance requirements of the City of Coral Gables.
- _____ I understand and agree that inflatable amusement devices are **prohibited** in/at any park and/or facility managed by the Coral Gables Parks and Recreation Department with the exception of the Coral Gables Youth Center.
- _____ I understand and agree that permission for use of an inflatable devise (at the Coral Gables Youth Center ONLY) will only be given by meeting the conditions outlined in the Facility Rental Usage Policies.
- _____ I understand and agree that live animals (petting zoos, pony rides, wildlife displays, etc.), mechanical rides and any other entertainment devise is **prohibited** in all City of Coral Gables parks and facilities.
- _____ I understand and agree that the serving of alcoholic beverages is only permitted when: in conjunction with a Facility Rental Permit Application; approved by the Parks and Recreation Director; and, only in designated areas of the Venetian Pool and Coral Gables Youth Center.

**CORAL GABLES WAR MEMORIAL YOUTH CENTER
END OF FACILITY RENTAL CHECKLIST**

Date of Rental: _____ Time: _____

Name: _____

Address: _____ City: _____ Zip: _____

Amount Paid: \$ _____ Total (Refunded / Credited): \$ _____

Rental Area: _____ Green Pavilion _____ Red Pavilion _____ Blue Pavilion

_____ Classroom _____ Conference Room _____ Other

Please read and initial each item listed below:

_____ Garbage disposed in appropriate containers.

_____ Area vacated by _____.

_____ Tables and chairs wiped down.

_____ All decorations removed from furniture and facility.

_____ No physical damage to facility or furniture

If damages are found please list below:

*The renters security deposit will be returned via a mailed City of Coral Gables check in 2-3 business weeks, assuming all rental conditions are met.

All above items listed were reviewed and no action is required unless indicated.

Renters Signature _____ Date _____

Clerk's Name _____ Date _____

FOR OFFICE USE ONLY

(Process for Refund Approved By) Approved Denied

City of Coral Gables Parks & Recreation

Facility Rental Fees and Charges

Name	Location	Cost	Deposit	Rental	Min. Hrs	Availability
Coral Bay Park Pavilion	1590 Campamento Ave	\$42/hr + Tax	\$100	15 ppl.	2	Monday-Sunday Sunrise-Sunset (Resident ONLY)
Jaycee Park Pavilion	1230 Hardee Rd	\$42/hr + Tax	\$100	15 ppl.	2	Monday-Sunday Sunrise-Sunset (Resident ONLY)
Pierce Park Pavilion	101 Oak Ave	\$42/hr + Tax	\$100	15 ppl.	2	Monday-Sunday Sunrise-Sunset (Resident ONLY)
Sunrise Harbor Park Pavilion	25 Sunrise Ave	\$42/hr + Tax	\$100	15 ppl.	2	Monday-Sunday Sunrise-Sunset (Resident ONLY)
Phillips Park Pavilion	90 Menores Ave	\$53/hr + Tax	\$100	30 ppl.	2	Monday-Sunday Sunrise-Sunset
Kerdyk Family Park & Pavilion	6611 Yumuri St	\$53/hr + Tax	\$100	30 ppl.	2	Monday-Sunday Sunrise-Sunset
Salvadore Park Pavilion	1120 Andalusia Ave	\$53/hr + Tax	\$100	30 ppl.	2	Monday-Sunday Sunrise-Sunset
Phillips Park Field	90 Menores Ave	Pricing Varies	\$100	30 ppl.	2	Directors Approval
Facility Name	Facility Address	RESIDENT	CITY NON-PROFIT	RESIDENT FOR PROFIT	NR	
CGYC Gymnasium HALF	405 University Dr. (CGYC) 460-5600	\$41 / hr 2-hour min	\$54 / hr 2-hour min	\$68 / hr 2-hour min	\$82 / hr 2-hr min	Directors Approval
CGYC Gymnasium FULL	405 University Dr. (CGYC) 460-5600	\$73 / hr 2-hour min	\$98 / hr 2-hour min	\$123 / hr 2-hour min	\$147 / hr 2-hr min	Directors Approval
CGYC Classroom	405 University Dr. (CGYC) 460-5600	\$42 / hr 2-hour min	\$54 / hr 2-hour min	\$68 / hr 2-hour min	\$82 / hr 2-hr min	Mon-Fri 6:00am-10:00pm Sat 7:00am-4:00pm **Pending Availability
CGYC Conference Room	405 University Dr. (CGYC) 460-5600	\$42 / hr 2-hour min	\$54 / hr 2-hour min	\$68 / hr 2-hour min	\$82 / hr 2-hr min	Mon-Fri 6:00am-10:00pm Sat 7:00am-4:00pm **Pending Availability
CGYC Theater	405 University Dr. (CGYC) 460-5600	\$101 / hr 2-hour min	\$135 / hr 2-hour min	\$168 / hr 2-hour min	\$202 / hr 2-hr min	Mon-Fri 6:00am-10:00pm Sat 7:00am-4:00pm **Pending Availability
Staff for After-hours Rental (<i>per staff</i>)	405 University Dr. (CGYC) 460-5600	\$40 / hr 2-hour min	\$40 / hr 2-hour min	\$40 / hr 2-hour min	\$40 / hr 2-hr min	Directors Approval