

Blowing Rock Parks and Recreation
Facility Use Agreement

Group/Organization Using facility (if applicable) _____
Person Responsible for Event _____ (h) phone _____ (w) _____
Mailing address _____ city _____ state _____ zip _____
Physical address _____ city _____ state _____ zip _____
Do you pay Blowing Rock taxes? ____yes ____no Number of participants (approx.) _____
Facility/Facilities _____ Purpose of use of facility _____
Date requested _____ Time of use _____
Will there be any items or food sold? If yes, please explain _____

Waiver and Release

I/We (individual or group representative) _____, understand that I/We are responsible for any injuries, accidents and damages to the Blowing Rock Recreation Building/Activity room, Rotary Picnic Pavilion, Broyhill and Annie Cannon Parks, or the Ruritan Building that occur while using the facility during the reserved time, and understand that the **maximum capacity for the Activity room is 110 persons, Picnic pavilion 114 persons, Ruritan Building 140 persons**, according to Fire Code. I/We also understand that the use of tobacco (recreation activity room and Ruritan Building), alcohol or drugs is prohibited. Any music and/or noise must be kept to a reasonable level. Use of grills is limited to gravel area under Rotary Picnic Pavilion. Use of Activity Room and Ruritan Building will end by midnight, use of Picnic Pavilion, Broyhill Park, and Annie Cannon Park by 9:00 pm. By authorization, I/We hereby approve and accept the facilities and acknowledge that I/We have had the opportunity to inspect the premises and have spoken with the supervisor or waive the right to do so. I/We accept the responsibility of supervising all persons during the usage of the reserved facilities and will be held responsible for their actions. I/We further understand that all reserved facilities and surrounding areas must be left clean, and trash removed or placed, bagged, in Town trash containers. Failure to meet contract agreement will result in loss of deposit and use of facility. **Deposit refunds will be issued within four weeks of reservation date.**

It is understood and agreed between the parties hereto that the Town shall in no way be responsible for any property damage or personal injuries arising out of _____'s occupancy of the Town-owned property leased hereunder. Further, _____ hereby agrees to indemnify and hold harmless the Town from any and all claims and demands growing out of personal injuries and/or property damage occurring during or resulting from _____'s occupancy of the Town-owned property leased hereunder, which claims shall specifically include any attorney's fee incurred by the Town in relation to said claims or demands.

Refund Policy

Cancellation Policy: Should the reservation be cancelled, the deposit will be returned with a percentage of the impact fee. The cancellation policy will be as follows:

Six months prior to scheduled date of reservation:	90% refund
Four months prior to scheduled date of reservation:	60% refund
Two months prior to scheduled date of reservation:	30% refund
Within two months of scheduled date of reservation:	No refund

I have read and understand the Waiver and Release, the Refund Policies, and the Rules and Regulations and I agree to these terms.

Signature of Representative or Individual _____ date _____
BRPR Representative _____ date _____

<u>FACILITY</u>	<u>DEPOSIT</u>	<u>FEE</u>
Rotary Pavilion/Davant Ball Field	\$50	\$100
Recreation Building	\$50	\$100
Broyhill Park	\$150	\$250
Annie Cannon Park	\$150	\$250
Ruritan Building	\$50	\$100

For department Use Only:

Deposit Paid: _____ Ck#/Cash _____ Date: _____ Staff initial: _____

Fee Paid: _____ Ck#/Cash _____ Date: _____ Staff initial: _____

Deposit Returned: _____ Date: _____ Staff initial: _____