

Putnam County Parks & Recreation Facility Usage Permit

Facilities Available to Rent: (Please circle facility you are requesting)

Bostwick Community Center		Edgar Johnson Senior Center			
Interlachen Com	terlachen Community Center Lake Como Community C		Como Community Center		
Title of Event:			Expected a	attendance:	
Day/Date of Event:			_From:	am/pm To:	am/pm
Primary Permitee:					
Address:		City: _		Zip Code:	
Cell #:	Home #:		Work #:		
Secondary Permitee:					
Address:		City: _		Zip Code:	
Cell #:	Home #:			Work #:	

Facility Rental Hours

(Hours may vary and are subject to change Please call to verify)

Bostwick Community Center - 7am – 11pm

Edgar Johnson Senior Center - Mon-Fri 6pm – 11pm, Sat-Sun - 7am – 11pm

Interlachen Community Center - Mon-Fri 6pm – 11pm, Sat-Sun - 7am – 11pm

Lake Como Community Center - 7am – 11pm

Facility Name	Maximum Capacity	Hourly Rate	Deposit Amount
Bostwick Community Center	150	\$25	\$100
Edgar Johnson Senior Center	100	\$33*	\$100
Interlachen Community Center	100	\$25	\$100
Lake Como Community Center	75	\$25	\$100

Staff Fee Included

All permits with the exception of Edgar Johnson need to be turned in to the Main Office located at **120 Carter Rd Palatka, FL 32177**

PCPRD reserves the right to cancel any event with at least thirty (30) days' notice or at any time a group or individuals violate the policies of PCRD or Putnam County.

Please Note: No refunds will be given if agreement is violated or breached by facility user/group.

General Terms:

All events held Putnam County Parks and Recreation property or facilities remain under control of the Department, with the final word in decisions about whether the event should be held or continued in times of inclement weather, civil disturbance or other conditions deemed unacceptable by the staff.

Other Guidelines (financial/misc.):

- Alcoholic Beverages and/or illegal substances are prohibited on County/PCPRD property. Appropriate Law Enforcement agencies will be notified when violations occur and appropriate action against all involved parties will apply.
- All bookings must be made 72 hours in advance and paid for at this time.
- Repeat or multiple bookings must be approved by PCPRD.
- Normal hours vary for each facility, check with PCPRD for specific times.
- Permit to use the facilities is not transferrable without written permission of PCPRD.
- PCPRD reserves the right to require supervision/security which will be paid by the Permitee.
- Specific, prior permission is required for decorations or alterations to fixtures, walls, etc. or posting of signs.
- No grills or cookers allowed indoors or on playing surfaces, fields/courts.
- Permitee's are responsible for proper cleanup of equipment and surrounding area.
- Amplifiers or devices that produce loud noises are subject to PCPRD prior approval.

Permitee agrees to indemnify and save PCPRD, Putnam County BOCC and any of its agencies, subdivisions, officials, employees and agents, harmless on account of any and all claims for damages to persons or property which arise from any activity related to the special event held by Permitee or occurring at any park or facility provided to Permitee under this agreement, due in whole or in part to the negligence of Permitee, its agents, customers, employees, event participants or any other person attending the special event or located on the facilities or parks provided to Permitee with the express or implied permission of Permitee. Permitee agrees to reimburse PCPRD, Putnam County BOCC and any of its agencies and subdivisions for any and all losses incurred by them, including attorney's fees, expenses and court costs which arise from activities related to the special event or occur on the facilities and parks provided to Permitee.

Permitee further agrees to purchase comprehensive liability insurance on the parks and facilities provided to Permitee as required herein. The Parks and Recreation Director has discretion in determining when insurance is required. All insurance policies shall be issued by companies authorized to do business under the laws of the State of Florida. Permitee shall purchase and maintain a policy or policies of commercial general liability insurance satisfactory in all respects to County. All policies shall be occurrence form policies and shall name PCPRD as an additional insured, with a right to defense, with the premiums thereon fully paid by Permitee on or before their due date. The liability insurance policy shall afford minimum protection of \$1,000,000 combined single limit coverage for bodily injury, property damage or combination thereof. Required insurance shall be documented in Certificates of Insurance which provide that the County shall be notified at least 30 days in advance of cancellation, nonrenewal or adverse change. Permitee shall furnish complete copies of its insurance policies, forms and endorsements. Initial: ______ Date: ______ (read and understood)

Acceptance of Permit Agreement:

I hereby agree to use the aforementioned facility subject to the rules and regulations of the Putnam County Parks and Recreation Department which states that the person(s)/organization, desiring the use of said facility will be responsible for all damages to building and/or property. This agreement becomes valid when deposit fee is paid in full. Remainder of Permitee fee is due and payable 72 hours in advance of Event date. To ensure your reservation please pay fee by deadline so that we can properly plan your event and allow your group to fully enjoy the facility. *Note: in cases of severe inclement weather, if the facility is deemed inappropriate for use by PCPRD STAFF, the event can be rescheduled or the fee may be refunded.*

I HAVE READ AND HEREBY AGREE TO ABIDE BY ALL ITEMS/TERMS LISTED IN THIS FACILITY PERMIT AGREEMENT POLICY AND PUTNAM COUNTY RECREATION DEPARTMENT PROCEDURES AS WRITTEN.

Signature PCPRD Director/Staff

Signature of Permitee Or Permitee's Authorized Representative

Date

Date

*** FOR PCRD USE ONLY ***

 Rental procedures and responsibilities given to user/organization:
 Yes /No
 By: ______

 Deposit Amount Paid: ______ Collected by: ______ Date: ______
 Date: _______

 Remaining Amount Due: ______ Collected by: ______ Date: ______
 Date: _______

 amount due must be paid in full prior to rental date

CANCELLATION DATE: ______FEE REFUNDED (\$):_____