

## TOWN OF STOKESDALE

## Facility Use Agreement

Group/Organization Using facility (if a	pplicable)			
Person Responsible for Event				
(h) phone(w)				
Mailing address		city	state	zip
Physical address		city	state	zip
E-Mail Address:				
Driver's License Number (or picture II	copy required)			
Do you reside within the Town Limits		yesno		
Facility Requested: Circle all that app				
PARK: (8329 Angel Pardue Road)	Ball fields	Picnic Shelter	Concession St	and
TOWN HALL: (8325 Angel Pardue Road)	Community Roo	om Kitchen		
Number of participants (approx.)		Estimated # of Ve	hicles:	
Date requested				
Purpose of use of facility				
Will there be any items or food sold? If	yes, please explai	n		
Will food be served? If	yes, has permit from	om Health Dept. be	en obtained?	
Vendors On Site: Yes No				
Describe types of containers, cooking e	equipment, etc. to b	e use		
Electric Hookup: Yes No	Amplified Mus	ic/Public Address S	Systems:	
Other:				

Insurance Coverage is Required. Send Certificate of Insurance to Town of Stokesdale

## **Waiver and Release**

I/We (individual or group representative) \_\_\_\_\_\_\_\_, understand that I/We are responsible for any injuries, accidents and damages to the Stokesdale Town Hall or Stokesdale Park at Martin's Meadow that occur while using the facility during the reserved time, and understand that the maximum capacity for the Town Hall is 100 persons according to Fire Code. I/We also understand that the use of tobacco, alcohol or drugs is prohibited. Any music and/or noise must be kept to a reasonable level. Use of grills is limited to area at Picnic Shelter. 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

Town of Stokesdale 8325 Angel Pardue Road PO Box 465 Stokesdale, NC 27357

Phone: 336-643-4011

result in loss of deposit and use of facility.
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
Reservations must be made at least one month in advance of the event and cannot be reserved more than 12 months in advance. One half of the rental fee to be paid when reservation if made with balance due at least two weeks prior to the event. Events not approved will receive full refund of all fees.
The Town has the right to waive fees at the discretion of the Town Council. A valid 501(c)(3) form must be provided to be eligible for not-for-profit status.
Leagues or organizations that can provide financial or in-kind support to the maintenance or operations of the athletic fields and/or facilities may be considered in lieu of monetary fees. All requests must be submitted in writing and must be approved by Town Council and a separate User Agreement shall be executed between the user and the Town.
Town Council reserves the right to cancel any event due to severe weather or field conditions that would potentially cause damage and wear and tear to the fields/facility. The renting party will be given the opportunity to reschedule the event at no additional charge.
Refund Policy
Cancellation Policy: Should the reservation be cancelled, the deposit will be returned. The cancellation policy will be as follows:
Six months prior to scheduled date of reservation:  Four months prior to scheduled date of reservation:  Two months prior to scheduled date of reservation:  Within two months of scheduled date of reservation:  No refund  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
Town Representative date
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trash removed or placed, bagged, in Town trash containers. Failure to meet contract agreement will

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SPECIAL EVENTS				
FACILITY	DEPOSIT	TOTAL FEE		
PARK				
Ball Field	\$10.00/hr			
Picnic Shelter	\$15.00	\$30.00		
Concession Stand	\$15.00/Hr			
TOWN HALL				
Community Room	\$ 75.00	\$150.00		
Kitchen	\$37.50	\$ 75.00		
MISCELLANEOUS CHARGES				
Cleaning Fee	To Be Determined	To Be Determined		
Set up Fee/Community Room	\$50.00	\$100.00		
Lost Key Fee	\$100.00			

	OFFICE USE ONLY	
	Cash/Check #	Date & Staff Signature
Application Received		
Deposit Paid:		
Receipt #		
Rental Fee Paid		
Receipt #		
Staff:		

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