



Special Event Request Application

P.O. Box 1419, Pelham, Alabama 35124 | 205.620.6426

Tdudley@pelhamalabama.gov

DATE RECEIVED: _____

CONTACT NAME: _____

ORGANIZATION NAME: _____ EIN NUMBER: _____

ADDRESS: _____ PHONE: _____

_____ EMAIL: _____

EVENT NAME: _____

EVENT DATE(S): _____

EVENT START TIME: _____ EVENT END TIME: _____ ESTIMATED ATTENDANCE: _____

PURPOSE OF THE EVENT:

Private Event

Travel Ball Tournament

Church Event

Meeting/Seminar

Special Event

Concert

Other (If other, please explain)

ARE THERE ANY SPONSORS FOR THIS EVENT? IF SO, PLEASE INCLUDE THEIR CONTACT INFORMATION

EVENT DESCRIPTION: (PLEASE PROVIDE FULL DETAILS OF YOUR EVENT TO INCLUDE ALL PLANNED ACTIVITIES TAKING PLACE IN THE PARK. BE AS DETAILED AS POSSIBLE.)



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REQUESTED FACILITIES:

- | | | |
|--|---|---|
| <input type="checkbox"/> Multipurpose Room | <input type="checkbox"/> Fungo Holler Baseball/Softball Field | <input type="checkbox"/> Beach Volleyball Court
2 or 4 courts? _____ |
| <input type="checkbox"/> Depot Conference Room | <input type="checkbox"/> Football Field | <input type="checkbox"/> Indoor Basketball Court
1 or both courts? _____ |
| <input type="checkbox"/> Outdoor Basketball Court
1 or both courts? _____ | <input type="checkbox"/> Parking Lot
Which one? _____ | <input type="checkbox"/> Entire Recreation Center |
| <input type="checkbox"/> Pelham Park Baseball/Softball Complex (4 fields) | | |
| <input type="checkbox"/> Other (If other, please explain) | | |

What is your trash clean up plan?

Will your event have live music or amplified sound?
YES _____ NO _____

Will there be Canopy(ies) and/or Tent(s)?
Please include dimensions: _____
YES _____ NO _____

Will there be any signage, tents, banners or temporary lighting used or displayed?
YES _____ NO _____

Will an EMT/Security be on site?
If yes, please provide agency and contact information.
YES _____ NO _____

Will your event have any food/treat trucks?
Each food vendor must have a Pelham food truck permit
YES _____ NO _____

Will you need access to electricity?
If yes, please provide source.
YES _____ NO _____

Will there be an admission charge for your event?
YES _____ NO _____

Will water be required?
If yes, please provide source.
YES _____ NO _____

Will there be Inflatable Device(s), Amusement(s)?
YES _____ NO _____

Will any park right-of-ways be closed? Will any streets be closed?
If yes, please provide areas/streets that will be closed.
YES _____ NO _____

Will your event have any merchandise/food vendors?
Each vendor must have a City of Pelham business license
YES _____ NO _____

Staffing

Pelham Parks & Recreation provides one full-time and one part-time staff member to help with the disposal of trash and field setup and/or maintenance. Additional staff members may be requested at an additional rate of \$30/hour.

Event Times

The duration of the event, including setup and breakdown, is outlined in this agreement and must be adhered to. If the event does not end at the agreed-upon time, a fee of \$50.00 per additional hour will be applied.

Payment

A deposit is required at booking to guarantee the desired space. Full payment for the rental space is due two weeks prior to the event. Pelham Parks & Recreation requires that a credit card be placed on file at the time this agreement is signed. We accept CASH, CHECK, VISA, MASTER CARD, DISCOVER CARD, and AMERICAN EXPRESS. A processing fee of 3.25% will be charged as a separate transaction on your credit card statement and will not appear on your final invoice.

Miscellaneous

Inflatables and bounce houses are allowed but require liability insurance with the City of Pelham listed as an additional insured. Table clothes and table decorations are allowed. Wall decorations and glitter are prohibited. Please dispose of balloons properly and do not release them into the air. Please dispose of all food, beverages, and decorations. Any trash must be placed in the provided trash cans.

Food

Outside food and beverages are allowed, including food trucks. **Alcohol is strictly prohibited.** Gas and propane grills are allowed with prior approval from the Parks & Recreation Department, but must be at least 20 feet away from any building/structure or overhanging limbs. Pelham Parks & Recreation and the City of Pelham are not responsible or liable for food preparation, food serving, or illness caused by food served at private events. NOTE: All food trucks must have a Pelham Business License. Documentation MUST be given to Pelham Parks & Recreation prior to the event. An Additional fee to utilize the parking lot may apply.

Cancellation/Refund Policy

30 Days or more	100% Refund
Days 29 - 14	50% Refund
13 Days or less	Deposit Forfeited

A 100% refund will be issued for cancellations by Pelham Parks & Recreation for any reason. For cancellations, please contact Parks & Recreation Supervisor.

Damage

The client assumes full responsibility for the space being rented and agrees to pay Pelham Parks & Recreation and the City of Pelham for any and all damage or loss caused by the client/user and of customer/user's guests, invitee and/or any person or organization contracting with the client/user to provide any service or goods before, during or after the function, or by any other person or persons on said premise attending or because of client/users event. The client/users shall indemnify and hold Pelham Parks & Recreation and the City of Pelham safe and harmless for damage or liability for damage or injury to the person or property of Pelham Parks & Recreation and the City of Pelham, or any other person or entity. The client must submit a copy of liability insurance listing the City of Pelham on the policy or purchase a one-day special event policy. If the event exceeds 100 attendees, the client must submit this information to Pelham Parks & Recreation at least two weeks prior to the event.

Inclement Weather

Pelham Parks & Recreation and/or City of Pelham staff reserves the right to close any and all outdoor areas due to inclement weather and unplayable or unsafe conditions.

Conduct

Pelham Parks & Recreation and City of Pelham staff reserve the right to remove any person(s) associated with an event whose behavior is unbecoming and violates the City of Pelham's Code of Conduct.

An APPROVED event site plan layout is required before an event takes place. Any changes must again go through the approval process by The City of Pelham Parks & Recreation Department staff before the event setup may occur.

Upon approval of an application, the deposit is due. The requestor must include set-up, event, and clean-up times in the hours given for facility usage. The deposit is subject to forfeiture if the facility is left unclean or damaged.

For any cancellations, email Tdudley@pelhamalabama.gov

PRINT NAME (REQUIRED)

SIGNATURE (REQUIRED)

DATE

OFFICE USE ONLY

YES _____ NO _____ Security deposit received

YES _____ NO _____ Credit/debit card on file

YES _____ NO _____ Food truck permits if applicable

YES _____ NO _____ Liability insurance if applicable

APPROVALS

Operations Supervisor - T. Dudley _____

DATE: _____

Assistant Director - A. Walters _____

DATE: _____

Director - B. Cooper _____

DATE: _____



Financial Authorization Form

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RENTAL AGREEMENT CREDIT AUTHORIZATION

I (we) authorize the Pelham Parks & Recreation Center to charge the amount agreed upon listed on the signed agreement/form to the credit card provided herein. **I understand that a processing fee of 3.25% will be charged as a separate transaction on my credit card bill and will not appear on my final invoice, and I agree to pay the below amount in accordance with the issuing bank cardholder agreement.** In the case of a transaction being rejected for Non-Sufficient Funds (NSF), I understand that the Pelham Parks & Recreation Center may, at its discretion, attempt to process the charge again within 30 days. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company so long as the transactions correspond to the terms indicated in this authorization form.

Card Type: ___ Visa ___ MasterCard ___ American Express ___ Discover

Cardholder Name (as shown on card): _____

Card Number: _____

Expiration Date (mm/yy): _____

CVC: _____

Billing Address: _____

Billing City, State, and Zip code: _____

Signature

Date