

FACILITY RENTAL REQUEST FORM The People's Park

1 Harry S Truman Parkway Annapolis, MD 21401 (410) 222.7300 Fax: (410) 222.4120 website: www.aacounty.org/recparks

Request Date:

Thank you for you interest in hosting an event with Anne Arundel County Recreation & Parks. We ask that you please complete this facility use request form to begin the reservation process. Please note that all requests must be submitted at least thirty (30) days prior to the requested event date and this facility request does not guarantee space availability. Please read entire document prior to submittal. Once completed, please e-mail or fax application to Megan Chido at rpchid22@aacounty.org or 410-222-2868. Once we have received your request, we will contact you to confirm or discuss the event. Please allow 2-3 business days for a response. You must be 21 years of age to apply for a special events permit.

CONTACT INFORMATION						
Primary Event Contact	:					
Billing Address:						
Contract Dhanay	Address 0	City	State	Zip		
Contact Phone:		Fax	#			
E-Mail:		Sponsor: If applicable				
EVENT INFORMATION						
Event Date:		2nd Choice Date (if applicable):				
Event Name:		Event Type:				
Event Start Time:		Event End Time		Use is for a full day (8hrs). — Start and end times allow for		
Set-Up Date:	Set-Up Time:			proper preparation of the		
Description of Event:				facility.		
Number of Attendees/ (Approximate)	5/Guest Facility is limited to 200 of guest. A Director's waiver is required if more then 200.					
Concessions/Caterer	NO Yes	If Yes, are t	hey licensed?			
Please indicate if you will be using any of the following:						
Admission Fee		<i>uired</i> Music	Electrici	ty Port-a-Pots		
Signage	Tents/pop ups	Vendors				

Other - Please indicate

The undersigned hereby makes application to Anne Arundel County Recreation & Parks (AACRP) for the use of The People's Park and certifies that the information given in this application is correct. The undersigned further states that he/she has the authority to make this application for the Applicant or organization and agrees that the Applicant has received, reviewed, understands, and will observe the Department's policies and procedures, as found in the Guidelines and Reference Manual and Facility User Rules and Guidelines attached. Applicant agrees to exercise the utmost care in the use of the AACRP property; the Applicant further agrees to reimburse the Anne Arundel County Recreation & Parks Department (Department) for any damage arising from the Applicant's use of the property. The Applicant hereby shall assume all risks incident to or in connection with the permitted activity and shall be solely responsible for damage or injury, including death, of whatever kind or nature, to person or property, directly or indirectly arising out of or in connection with the permitted activity or the conduct of applicant's operation. Applicant hereby expressly releases Anne Arundel County Recreation & Parks from any claims for damages or injuries, including death, and agrees to defend and save the Department harmless from any damages or injuries, including death, directly or indirectly arising out of or in connection with the permitted activity or conduct of its operation or resulting from the negligence or intentional acts or omissions of applicant or its officers, agents and employees.

My signature below acknowledges that I have read and understand the above terms and conditions:

Applicant Signature		Applicant Title	Date			
RECREATION & PARKS USE ONLY:						
APPROVED:		Date:				
	Director, Anne Arundel Coun	ty Department of Recreation and Park	(S			
DISAPPROVED:		Date:				
Director, Anne Arundel County Department of Recreation and Parks						
Permit is not approved unless signed and dated by authorized official.						
Paid:	Date:	Tender:				
	NOTECICOMME	NTO OFOTION				
NOTES/COMMENTS SECTION						