CITY OF CALLAWAY
CALLAWAY RECREATIONAL COMPLEX
504 CALLAWAY PKWY, CALLAWAY, FL 32404
OFFICE: (850) 874-0031

Date(s) of Event:	Type of event:
Contact Name:	Organization Name:
Telephone:	Email:
Address:	
Time In:	Time Out:

PAVILION ONLY
(Up to 3 hours)

User Fee:	$40.00
3% Sales Tax	$ 1.20
Total:	$41.20

I CERTIFY THAT I AM RENTING THIS FACILITY FOR USE BY ME, FOR A **NON-BUSINESS-USE.** I ACKNOWLEDGE THAT **INFLATABLES, WATERSLIDES, AND CHARCOAL GRILLS ARE NOT PERMITTED.** ANY TRASH THAT DOES NOT FIT IN THE TRASH RECEPTACLES MUST BE REMOVED FROM THE PROPERTY. I AM 18 YEARS OF AGE OR OLDER AND I FULLY UNDERSTAND THAT **NO ALCOHOLIC BEVERAGES, SMOKING OR VAPING** OF ANY TYPE ARE ALLOWED ON THE PREMISES, THAT I AM RESPONSIBLE FOR THE EVENT AND I WILL BE REQUIRED TO REIMBURSE THE CITY FOR ANY DAMAGE DONE. I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS THE CITY OF CALLAWAY FROM ANY DAMAGE, INJURY OR LOSS RESULTING FROM THE USE OF THE FACILITIES BY ME, THE GROUP, ASSOCIATION OR ORGANIZATION THAT I REPRESENT. **INITIALS:**_____

Payment Method	☐ **Check #**	☐ **Money Order #**	☐ **Civic Pay**

Client's Signature: _____ **Date:** _____

Payment Received By:_____ **Date:** _____

Cancellations must be made, in writing, 72 hours in advance prior to day of the event.

CITY OF CALLAWAY FACILITIES USE
INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

The undersigned for good and valuable consideration the receipt and sufficiency of which is hereby acknowledged, agrees to the fullest extent permitted by law, to indemnify, defend, pay on behalf of, and hold harmless The City of Callaway (the "City"), it's elected and appointed officials, its agents, employees, and volunteers and other working on behalf of the City from and against any and all claims, demands, suits, or loss, including any and all outlay and expense connected therewith, including reasonable attorney's fees, and for any damages which may be asserted, claimed or recovered against or from the City, its elected and appointed officials, employees, volunteers or others working on behalf of the City, by reason of personal injury, including bodily injury or death, and property damages, including loss of use thereof, which arises our of or is any way connect or associated with the undersigned's use of the City's facilities for the dates of _____ to _____, including acts or omissions by the undersigned's members, agents, servants, officers, employees, representatives, independent contractors and their subcontractors, invitees, patrons, and suppliers. It is the intention of the parties that the City, its elected and appointed officials, agents, employees, volunteers, or others working on behalf of the City shall not be liable or in any way responsible for injury, damage, liability, loss, or expense resulting to the undersigned, its members, agents, servants, officers, employees, representatives, independent contractors, and their subcontractors, invitees matrons, and suppliers due to accidents, mishaps, misconduct, negligence or injuries either in person or property of the City's facilities.

Agreed to this _____ day of _____, 20_____.

_____

Client

_____

City Staff