



Application for Meeting Room Use

Community and Senior Center / Summit County Government

PO Box 1845 Frisco, CO 80443

Applicant Name: _____ **Phone:** _____

Host Organization: _____

E-mail: _____

Mailing Address: _____ **City:** _____ **State/Zip:** _____

Event/Meeting Name: _____

Event/Meeting Date(s): _____

Event Description: _____

Estimated Number of Participants: _____ **Entry fee per Participant:** _____

Audio/Visual Equipment (check all needed):

No Charge: Podium Dry Erase Board Easel

\$25 Flat Fee: LCD Projector Conference Call Phone Microphone(s)

Damage Deposit - \$100 damage deposit is required for all room rentals; \$300 deposit is required for events involving alcohol sales. Checks will be returned or shredded following the room rental if no additional fees are required. **Amount Received:** _____ **Check #:** _____ **Date:** _____

Rooms Requested	Maximum Occupancy	Event Time(s) <i>Start to End (includes setup & clean up)</i>	Total # Hours	Hourly Fee <i>\$25/room/hour (Community) \$50/room/hour (Private)</i>	Total / Room
Hobby 782 sq. ft.	45 Seating Max				
Hoosier 840 sq. ft.	59 Auditorium Seating Max (7 tables)				
Fremont 840 sq. ft.	57 Auditorium Seating Max (7 tables)				
Loveland 840 sq. ft.	59 Auditorium Seating Max (7 tables)				
Ute 367 sq. ft.	20 Seating Max				
Kitchen <i>Orientation required.</i>	Commercial Kitchen				
AV Equipment or Set Up Fees					
				(x fee / hour)	

Total Fee

➤➤➤➤ Please see Page 2 for Additional Information ➤➤➤➤

[Type here]

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For events which will include the service/consumption of alcoholic beverages must have the express permission of Summit County Government.

**NOTE: Consumption of alcoholic beverages in or around County facilities is prohibited except at the Community Center where alcoholic beverages may be served in limited quantities with the prior approval of the County Manager or his/her designee, in accordance with all applicable state laws and County requirements.*

1) Private party serving alcohol to invited guests (NO SALES of alcohol) requirements:

_____ Adequate proof of general liability insurance - \$1.2 million

_____ Signed indemnification clause below

2) Events involving alcohol sales requirements:

_____ Special Event license for liquor sales (Obtain permit through Clerk & Recorder's Office)

_____ Adequate proof of general liability insurance - \$1.2 million

_____ Signed indemnification clause below

Initial: _____ I have reviewed the alcohol policies and agree to comply with them.

ALL ROOM APPLICANTS – Read, Initial, and Sign Full Name below:

_____ I have received, reviewed, and agree to comply with the regulations set forth in the Community & Senior Center Policies.

_____ I agree to indemnify and hold harmless Summit County Government for all claims arising out of the use of the Community & Senior Center, including personal injury, bodily injury, and property damage claims. I understand that private property brought onto County grounds is the sole responsibility of the owner. The County assumes no responsibility for damage to or loss of private property or for personal injury that may occur on County property.

_____ I understand and take full responsibility for returning the room to standard condition **including returning tables/chairs to the storage closets**. I understand that a **\$25 fee will be assessed for rooms not left in standard condition**. (Diagrams posted in closets.)

****Room setup service is available for an extra charge of \$50 per hour.***

_____ All information in this application is complete and accurate.

By signing below, I acknowledge and understand that Summit County Government does not provide any insurance or coverage for the public use of County meeting rooms. As such, it is my responsibility to obtain the proper insurance for this event/meeting and participants. Should I chose not to insure this event/meeting, I will inform the participants of my decision and all associated risks of such decision. I further acknowledge and understand that should I choose not to obtain insurance, I may be personally liable for any accidents and/or injuries that occur during this event/meeting.

Applicant Signature

Date