

BANKS COUNTY PARKS & RECREATION DEPARTMENT
REQUEST FOR FACILITY USE
(Please Print or Type All Information)

Return completed application to: 607 Thompson Street, Homer Georgia 30547,
Fax: 706.677.3622, Email: bwhitmire@co.banks.ga.us
For assistance or information, call (706) 677-4407.

APPLICANT INFORMATION

Contact Name _____

Renter Group/Organization _____

Address _____
Street City State Zip Code

Email Address _____

Telephone (Work) _____ (Cell) _____

Additional Contact Person _____

Telephone: (Work) _____ (Cell) _____

REQUEST DETAILS

Date _____
(M,T,W,R,F,Sat,Sun) Month Day Year

Type of Event (check all that apply)

- Festival/Race/Walkathon
- Sale/Auction
- Concert/Street Dance
- Birthday Party
- Parade/March Sidewalk Exhibit
- Other (specify): _____

Location(s) of Event: _____
Athletic Field, Gym, Pavilion, Arena, Trails, Multipurpose Room, Etc.

Time of Event (include time for set up prior to, and clean-up following, the event):

Start Time _____ End Time _____

Peak Crowd Estimate _____ Estimated Number of Parked Vehicles _____
(Please mark all that apply, and attach the requested detailed information to the application.)

BC Electrical Services Required? Yes No

If yes, attach a detailed description of needs identifying location & electrical requirements.

Tents

Quantity _____ Brand _____ Size _____

Additional permit may be required from Building Inspection Department (706)677-4272.

If tents are enclosed, approval is required from the Fire Department (706)677-1812.

(Must identify on location map and submit with application.)

Clean up to be provided by:

BC Solid Waste Provider

Event

Volunteers

Private

Contractor

Arrangements have been made for restroom facilities.

Location and # available: _____

Fireworks.

(Additional permits required)

Street Closure? Yes No

If yes, attach a schedule detailing exact location(s) and exact time(s) of closure.

(Must identify on location map and submit with application.)

IF YOUR EVENT REQUIRES A STREET CLOSURE, PLEASE CHOOSE ONE OF THE FOLLOWING:

Annual Event *(street closures have been handled by the Sheriff Department in previous years, and there aren't any significant changes in event plans).*

Annual Event *(street closures have been handled by applicant in previous years).*

If your event requires the use of ACC barricades, cones, or signs, you must attach a detailed list of needs (type & quantity) and provide a schedule of what day/time the equipment will be picked up and what day/time the equipment will be returned. The Applicant is responsible for the pickup and return of all equipment.

New Event *(after the review of your application, we will advise you if any additional information is needed).*

Applicant's Signature

Date

DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY

Request Approved: YES NO

Staff Initials: _____

Booking Fee \$ _____

Total Due \$ _____

Check/Credit Card: _____

Rental Fee \$ _____

Date Paid: _____

**BANKS COUNTY
INDEMNIFICATION AND WAIVER OF LIABILITY**

FOR AND IN CONSIDERATION of the acceptance of a Banks County Special Event Permit,

(print name of Producer/Coordinator),

acting for and on behalf of

(print name of Organization/Sponsor)

hereby agrees to indemnify and hold harmless Banks County, Georgia, its agents and employees, from all liability, loss and damage which may be sustained by reason of injury to any person, damage to any property, including theft, through any and all acts or omissions of the Producer and/or Sponsoring Organization(s), his/her/its agents and employees, during and as a part of the Special Event known as:

as set forth in the Special Event Application dated _____.

This indemnification shall not be applicable to any loss or damage resulting from the sole negligence of Banks County, its agents and employees.

This _____ day of _____, 20____.

Signature of Producer/Coordinator