

FACILITY USERS APPLICATION

PART 1:

Name of Facility: _____

Mailing Address: _____

Location Address: _____

City: _____ Province: _____ Postal Code: _____

Contact Name: _____

Title: _____ Tel: _____ Cell: _____

Fax: _____ E-Mail: _____

PART 2:

Does your facility offer rental of any the following to third party users:

Hall/Drop-in Center Skating Rink Wall Climbing Curling Rink Classroom Gymnasium
Swimming Pool Playground Sports Field Other: _____

Limit Requested: _____

PART 3:

Hall Rental

Annual Revenue from Hall Rental: _____

- | | | |
|--|-----|----|
| 1. Do you have a standard rental agreement? | Yes | No |
| 2. Do you receive a damage deposit? | Yes | No |
| 3. Do you require third party to provide Liquor Coverage? | Yes | No |
| 4. Do you provide bartending? | Yes | No |
| 5. Do you have written procedures for serving alcohol? | Yes | No |
| 6. Do you require confirmation of insurance from Third Parties for liquor? | Yes | No |
| 7. Do you provide security services? | Yes | No |

If yes, please describe any written procedure: _____

PART 4:

Sports Fields

Annual Revenue from Sports Field Rental: _____

- | | | |
|--|-------|----|
| 1. Are there posted rules & regulations? | Yes | No |
| 2. Is there any supervision? | Yes | No |
| 3. Who is responsible for the maintenance of the fields? | _____ | |

PART 5:

Claims/Previous Insurance History

1. During the last five (5) years, have you ever had a claim or an incident that could lead to a claim? Yes No

If yes, please provide details: _____

2. Previous insurer: _____

Authorized Signature: _____ Date: _____

Print Name & Title: _____