City of Ocala

Recreation & Parks Department Facility Event Application



PERSONAL INFORMATION

Contact Person:	Phone Number:				
Business Name:					
Mailing Address:					
Date of Birth:	Driver License #:				
E-mail Address:					
Check those applicable:	☐ City Resident ☐ Non-Resident ☐ Non-Profit				
FACILITY REQUE	ST				
Facility Requested	Mary Sue Rich Community Center (Capacity: Varies) Banquet 1 Banquet 2 Banquet 3				
	☐ E.D. Croskey Center Gymnasium				
	(Capacity: Banquet 327, Bleachers Out 500, Bleachers In 894)				
	☐ Jervey Gantt Aquatic Fun Center (Capacity: Pool 120, Deck 510)				
	☐ Hampton Aquatic Fun Center (Capacity: Pool 105, Deck 462)				
Type of Function:	Is this a youth or teen birthday party?				
Name of Event:					
Date(s) Requested:	Maximum Attendance:				
Set Up Begins (Time):	My Event Begins (Time):				
My Event Ends (Time):	Cleanup/Breakdown complete (Time):				
Description of Activities:	Is this by invitation only, a private event and/or o to the public? If public please provide social medi				
	Invitation Only Posted on Social Media?				
	Public Event Platform(s) User Name				

Will you have music?	O Live Band or DJ	Name of Band	or DJ:			
	O Stereo Equipment		_			
	None					
Will you sell tickets? Check	In advance ONLY Ticket Price (In Advance)					
which apply.	In advance & at the door					
	At the door ONLY Ticket Price (At the Door)					
	○ I will NOT sell tickets to this event					
Allele Which amplice?	At the state of the same					
Alcohol: Which applies?	Alcohol will be serv					
	There will be NO alcohol at this event					
Will anyone under age of 18	0-5 12-15	Will you be using	Yes			
be in attendance? If yes,	O 6-11 16-17	the kitchen?	○ No			
what ages?			○ Not App	olicable		
Do you anticipate a need to		If Yes, describe:				
use any park space exterior	Yes Hares, describe.					
to the facility (other than for routine parking)?	No					
After the Recreation and Parks Depart rental agreement, special event permi necessary paperwork if approved. Until	it, MOU or lease is needed. T	The appropriate staff will cont	tact the above	applicant to complete the		
By signing this application I acknowledge agree to abide by all terms and conditemployees and volunteers against, and losses, costs, and expenses, including a be asserted against City or its elected result of Permittee's possession of the during Permittee's possession of the factories.	tions outlined therein. If a p d hold City and its elected o attorney fees, which City or it officials, employees or volun e facility, including, without	ermit is issued, I agree to inc officials employees and volunt ts elected officials, employees, ateers, arising out of the Perm	lemnify the City eers harmless f , or volunteers i it or the condit	y and its elected officials, from, all damages, claims, may sustain, or which may tion of the facility, or as a		
Applicant Signature			Date			
FOR OFFICE USE ONLY						
Division Head			Date			
Recommend Process As:	Rental Agreemen	t				
	Special Event Permit					
	MOU/Lease					
Recreation & Parks Director			Date			
or Designee						
Request Approval/Denial:	Approved	Comments:				
Request Approvai/Derilar.	Approved with re	visions				
	Denied					