

## **RENTAL REQUEST FORM - SPORTS**

New Request

Renewal

Previous Rental Agreement #

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A. APPLICA				Ν		Website (if applicable):  Primary Contact (last name, first name):								first name) :			
Organization/ Group (if applicable):							vvebsite (ir applicable) :				Primary Contact (last name, first name):						
Position : Address :						'	Ci	ty:				Province :				Postal Code :	
Main Phone # : Alt. Phone # :					Em					Not-for-Profit/Charitat				egistration Number			
Organization Type : Youth Adult						Recreational				Professional							
Alternate Contact (last name, first name):				Posi	Position :			Main Phone #:			Alt. Phone #: Er			mail :			
B. RENTAL II	NFOR	MATIC	ON														
Rental Name												Expe	ected A	ttendar	nce		
Preferred Location Specific Area					c Area	Alternate Location								Specific Area			
Does your rental include alcohol? Yes No						Does your rental include an amusem					ice or	inflatab	le?	Yes	. No		
Number of Participants/ Attendance						0	OR Number of Teams										
	Ice			Indoor Fieldhous		se	Room		Gymnasium			Football Flag Contact			Outdoor Cricket Hardball Softball		
Facility Type	H	Indoor Cricket Hardball Softball		Outdoor Soccer Fiel Grass Turf			d Arena Floor		Lacrosse Box (Indoor) Field			Track Indoor Outdoor			Field Hockey Indoor Outdoor		
	Ball Diamond		nd	Hardball Softba		oall Kab	Kabaddi		Indoor Outdoor		Other						
Dates Required (mm/dd/yy)					Frequency		Preferred Day(s) of Wee			/eek	Times Required (H				1M)	Exclusion Dates	
Start Date		End Date		Dai	Daily / Weekly / Mo		onthly S		Sunday - Saturday		Start Time E			End	ind Time (mm/dd/yy)		
Tourname	nt / S <sub>i</sub>	pecia	I Even	t Reques	t												
Tournamen	ne Preferred Locat			ion(s) Times Requ		equired (H	uired (HH:MM)		Dates Required		(mm/dd/yy)		# of Participan		nts Expected Attendance		
						Start Tim	ie End	Time	Start Dat	e E	End Date	I Date					
Tourname	nt / Sį	pecial	l Event	Require	ements										l		
Required Re	ntal	Room			Servi	Serving Alcohol		# of Dressing Rooms :				# of Picnic Tables (outdoor only):					
Amenities (Additional C	Cost)	Staging			Selling Alcohol		Мι	Music (applicable SOCAN fee ap			applies)	pplies) # of Portable Toilets (outdoor only):					
		Other:															
Required Permits (Outdoor Only)		Concessions				BBQ		Beer Garden			Vehicle Permit				Vendors		
Purpose of	f ront	al & /	Additio	nal Com	mente A	nd/∩r Ro	auireme	nte									
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## C. LIABILITY INSURANCE

I understand that, in order for my rental to be considered, the **Rental Agreement Holder** is required to hold a third party liability certificate of insurance naming the "City of Brampton" as an additional insured with a minimum of \$5,000,000 coverage. Facility user liability insurance coverage will be required to be in place, by way of either:

Purchasing the applicable liability insurance through the City of Brampton dusing the booking process; or

Obtaining sufficient liability insurance coverage that is equivalent to the City's liability insurance requirements.

## C. PAYMENTS/ CANCELLATIONS

I understand that, this is a request form only; availability is subject to change based on rental requests currently being processed. I have no rights or claims to the requested space until such time as I receive a tentative Rental Agreement for my acknowledgment and verification of the rental details. Incomplete forms and/or requests received less than four (4) weeks' in advance may not be considered.

I understand that, in order to guarantee a booking the City must receive payment one (1) month prior to your first booking, otherwise your Rental Agreement is subject to cancellation. A 20% non-refundable deposit is required at the time of booking, If your booking is within thirty (3) days, payment must be received in full. Please visit www.brampton.ca or contact 905-874-BOOK for payment options . Please accept this form as my application for the facilities indicated above. I hereby state the facilities have been requested exclusi vely for the group I represent.

As the Permit Holder, I understand that I must notify the Rental Unit in writing two (2) weeks in advance of any cancellation.

Authorized Signature of Individual or Organization/Group

Date (mm/dd/yy)

For Office Use Only - Additional Comments

The personal information on this form is collected under authority of the Municipal Act SO 2001, c. 25. The information will be used to communicate you for rental administration purposes. Questions about the collection of personal information should be directed to the Recreation Supervisor, Sport & Community Partnerships, 2 Wellington St W, Brampton, ON, L6Y 4R2, 905-874-2352. Please review the City's Privacy Statement for more information.

PLEASE SUBMIT THE FORM BY MAIL AT CITY OF BRAMPTON - RECREATION DIVISION C/O RENTAL AGREEMENTS, 175 SANDALWOOD PKY W, BRAMPTON, ON, L7A 1E8 OR EMAIL AT FACILITYRENTALS@BRAMPTON.CA

**Submit**