

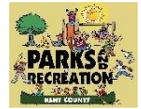


County Commissioners of Kent County, MD

Department of Parks & Recreation

11041 Worton Road, P.O. Box 67, Worton, MD 21678

410-778-1948 * info@KentParksAndRec.org



Pool Rental Reservation Application

Reminder: Applications for exclusive use rentals must be received by the Department no less than thirty (30) days prior to the desired rental date along with a \$150 refundable damage/clean-up deposit (this deposit is separate from the rental fee and must be made in the form of separate payment). **Please make checks payable to County Commissioners of Kent County.**

Requestor Information

Full Name: _____ DOB: _____ Today's Date: _____
 Organization: _____
 Mailing Address: _____
 City, **County**, State, & Zip: _____
 Home Phone: _____ Work Phone: _____
 Cell Phone: _____ Email Address: _____

Pool Information

Pool Requested:
 Bayside Pool Community Center Pool Millington Pool
 2nd Choice: _____
 Date(s) Requested: _____
 Time Requested (include ending time): _____
 An additional 1/2 an hour before and 1/2 an hour after rentals are permitted free of charge for setup and cleanup.
 Please do not include these 1/2 hours in the above field.

Event Name/Description: _____
 Number of People Attending: _____

Rules and Regulations: Review and initial each rule/regulation:

I understand it is my responsibility to follow Community Center General Policies and Pool Use Policies as "Contractor" and pledge to thoroughly review these policies prior to my scheduled use of the building. INITIAL HERE: _____

Fees are based on residency. KCPR reserves the right to require proof of identity-name, residency-address and age. Patrons who do not provide proof documentation will not be permitted to make a reservation. Patrons who indicate they are a Kent County resident and do not provide proof of residency-address (if requested) will be required to pay the non-resident rate. INITIAL HERE: _____

I am at least 21 years of age and understand I must provide Department personnel with a valid identification at the start of the permitted activity which will be kept in the Department's possession during the duration of the activity and may be copied for their records. INITIAL HERE: _____

I understand the Department will contact me within 48 business hours of my submission of this application and inform me of availability. If the desired rental date is available, the full rental payment must be paid within 7 calendar days of receiving notification from the Department. Once the payment is received, I understand I will receive an approved Rental Contract. INITIAL HERE: _____

I understand that alcohol, tobacco, controlled or illegal substances are strictly prohibited on County property. INITIAL HERE: _____

I understand I must be on-site, with the signed and approved Rental Contract for the duration of the permitted activity. INITIAL HERE: _____

I understand that I am responsible for the repair or replacement of any damage incurred to the facility or its contents during the permitted activity and cleanup of the area utilized. I understand that my deposit may be retained to cover these costs and that I will be billed if the costs exceed the \$150 deposit. INITIAL HERE: _____

I understand that I am responsible for cleaning the facility and returning its state to its original condition (including placement of tables, chairs, etc.) and that failure to do so may result in the forfeiture of the deposit. INITIAL HERE: _____

I understand that in accordance with the requirements of the Special Event Recycling Program (SERP), should my rental expect to have 200 or more persons in attendance, and serve food or drink, I am required to, at my own cost, provide recycling for the following items: cardboard; glass containers; plastic containers; paper; metal containers; food scraps. I acknowledge that in addition to providing recycling receptacles for recycled items, it is my responsibility to ensure the collection of all recycled materials from the rental site. Guidelines attached. INITIAL HERE: _____

I understand that cancellations must be received by the administrative office by the contract holder, during normal business hours, at least 7 calendar days prior to the event to qualify for a full rental fee refund minus a \$5 service fee. Failure to do so will result in the forfeiture of 50% of the rental fee. The full security deposit will be refunded.

INITIAL HERE: _____

I understand that Kent County Parks and Recreation reserves the right to have additional lifeguards and supervision at the event for an additional cost at my expense.

INITIAL HERE: _____

I understand that these Rules and Regulations are not all inclusive and I must refer to the Community Center General Policies and Pool Use Policies for the policies in their entirety.

INITIAL HERE: _____

I understand that Kent County Parks and Recreation, Kent County Government, its elected officials and employees are absolved of all responsibility and liability for any damage, injury, or loss sustained by person or property as a result of the user's negligence or that of any member in their group.

INITIAL HERE: _____

I understand that anything rented or acquired from an outside vendor/company/business must have prior approval from KCPR and may require proof of liability insurance from said vendor/company/business. Failure to obtain prior approval or proof of insurance may result in denial of rental request and or forfeiture of security deposit.

INITIAL HERE: _____

I understand that depending upon the type and size of my rental; I may be required to furnish a valid copy of a Certificate of Liability Insurance for myself or my organization prior to final contract approval. If I or my organization does not currently possess Liability Insurance, the Department of Parks and Recreation will provide information for a company that offers Liability Insurance, which may be purchased at my or my organization's expense. I further understand that the level of risk of injury will be assessed to determine if I will be required to add Kent County as an added insured for the duration of the rental.

INITIAL HERE: _____

I understand that as a condition of my rental, I am required to sign an agreement indemnifying and holding Kent County, its elected officials, employees, and other workers harmless from and against all loss, costs, expense, damage liabilities, or claims, etc.

INITIAL HERE: _____

In the event the rented facility is closed on the day of the rental for weather or another reason, **KCPR *does not* make individual contact to contract holders for Community Center building, athletic field, park pavilion or swimming pool closings/changes/updates on the day of a scheduled rental or in general.** Contract holders must sign up to receive notification alerts through our exclusive weather/other closures/updates notification method. The ***Rainout Line platform pushes updates out via *text message, email, Facebook and our website.*** An app is available to download on smart devices and a traditional call-in ***hotline (410-429-1401)*** is also available. Users select the method they would like to receive alerts by signing up from our rainout line page - <https://rainoutline.com/search/dnis/4104291401>. From there users can easily select one or more methods to receive alerts (left menu of page). Once signed up, individual alerts can be selected to be received by facility or receive them all - it's completely up to the user. ****Text messages are limited to 140 characters so the full message may not be displayed, and another method must be used to see the full alert.***

INITIAL HERE: _____

*** Please be advised that this is not an approved application until a staff member has indicated below.
* The Department reserves the right to cancel any Rental Contract.**

For KCPR Use Only

Date Request Received: _____ \$150 Deposit Received: _____

Pool Assigned: _____ Date Deposit Received: _____

Notes on when and how Requestor was notified: _____

Full Rental Payment Due: _____ Date Due (7 days after notification): _____

Date Received: _____ Form of Payment: _____ Staff Initials: _____

Notes: _____

Application

Approved Not Approved Staff Initials/Date: _____

Notes: _____

Cancelled by Contract holder on: _____ Reason: _____

Cancelled by Department on: _____ Reason: _____

Refund Information (if applicable): _____

\$150 Deposit Information:

Refund in Full Partial Refund Deposit Retained in Full

If any part of the Deposit is retained by the Department, please explain: _____

If refunding any part of the Deposit, please indicated date submitted to the Finance Office: _____

SPECIAL EVENT RECYCLING FACT SHEET

What are My Responsibilities Under the Special Events Recycling Program (SERP)?

Under Maryland Law, special event organizers are responsible for providing recycling at special events that meet the following three criteria:

1. Includes temporary or periodic use of a public street, publicly owned site or facility, or public park;
2. Serves food or drink; and
3. Is expected to have 200 or more persons in attendance.

You are responsible for providing and placing recycling receptacles adjacent to each trash receptacle at the event (except if already existing on site). Recycling receptacles must be clearly distinguished from trash receptacles by color or signage. You must ensure that the recyclables are collected and delivered for recycling. Finally, you are responsible for any costs and labor to carry out the recycling program at your event.

Which Materials Must be Recycled?

You must provide for recycling of at least plastic containers, metal containers, glass containers, and paper. If you will be serving food at the event, you must assess the availability of recycling service for food scraps, and if available, provide it. Note that you must provide separate collection bins for food scraps and other recyclables if food scraps collection will be provided. Edible surplus food may also be donated.

What Steps Should I Take Before the Event?

1. Obtain any required permits, licenses, and/or reservations required for the event.
2. Think about the waste stream that will be generated at the event. Can the quantity of waste generated at the event be reduced? For example, water and condiments may be served from bulk containers rather than in packets or plastic bottles; printed handouts and other materials may be double-sided.
3. Determine which materials will be accepted for recycling and assess availability of food recycling.
4. Contract with a recycling hauler for recycling. Be sure to ask about accepted and prohibited materials and the pickup timing and locations. Infinity Recycling provides event recycling – 410-928-3333
5. Visit the event venue and determine the number and location of trash receptacles.
6. Purchase or rent recycling receptacles for placement adjacent to all trash receptacles and deliver the recyclables to a Kent County recycling drop-off center. Free/printable images for signage are available here: <http://www.recycleminnesota.org/resources-6/free-signs-a-images>
7. Train staff that will be involved in the recycling program. Establish who is responsible for emptying recycling bins and when.

Where Can I Find More Information?

For more information and assistance in setting up the recycling program, please contact the Kent County Environmental Operations Department at 410-778-7439 and the manager of the event venue.

Helpful link:

- EPA's "Recycle on the Go" Website: <http://www.epa.gov/epawaste/consERVE/tools/rogo/index.htm>