

# City of Auburn Ballfield Rental Agreement

**\* FOR MULTIPLE DAYS, PLEASE ATTACH A BREAKDOWN OF THE SCHEDULE\***  
*This agreement cannot be subleased. For team use only*  
**\*\*You must be able to show proof of rental\*\***



## Lessee Contact Information

CONTACT PERSON:		
TEAM NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
CELLPHONE:	EMAIL:	

Athletic Field Rentals Acct: 100-322290
<b>City of Auburn</b> Parks & Leisure Department 1411 Sunbelt Way Auburn, GA 30011 Contact: Michael Parks 770-963-4002 Ext.230 parksdirector@cityofauburn-ga.org

## Rental Information

Non-Profit Organization  YES  NO If you chose YES, then include Tax ID: \_\_\_\_\_

## INSURANCE

Proof of liability insurance in the amount of \$1,000,000 is required to rent the facility

INSURANCE NAME:
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\*Attach proof of liability insurance to this form\*

## FILL OUT THE RENTAL DATE AND TIME BELOW:

Note: Some dates may not be available due to our priority ranking system and scheduling. Please choose 3 rental dates below:

<b>RENTAL DATE</b>	1ST CHOICE: / /	2ND CHOICE: / /	3RD CHOICE: / /
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<b>RENTAL TIME</b>	BEGIN: <input type="checkbox"/> AM <input type="checkbox"/> PM	END: <input type="checkbox"/> AM <input type="checkbox"/> PM	TOTAL DURATION: HRS
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## TERMS AND CONDITIONS

- All Non-Profit organizations must submit either tax ID number or proof of non-profit designation
- Proof of liability insurance in the amount of \$1,000,000 is required to rent the facility for practices or games. A certificate of insurance must be submitted with rental agreement.
- A \$35 NSF Fee is placed on each returned check
- A damage/cleanup deposit is required. The deposit will be 50% of entire facility rental cost. At the conclusion of the event the lessee is asked to leave the facility in a "ready to use" condition. Remove all decorations and garbage. The deposit is refundable if the event coordinator completes the checklist, finds the facility to be in good order and signs off on the agreement.
- Please ensure all lights are off and that all trash is in the proper trash receptacle.
- No alcoholic beverages are allowed.
- The City enforces State law regarding weapons on its properties and in its buildings.
- The rentals of the City of Auburn Ballfields are available to persons over the age of 18.
- As consideration for the use of the City of Auburn Ballfields, the undersigned agrees to indemnify and hold harmless The City of Auburn, Georgia, and its employees, officers, and agents from any and all claims and damages of any kind, including attorney's fees and expenses of litigation, relating to or arising from the undersigned's use of the City of Auburn Ballfields.
- Cancellation Policy: In order to be refunded your deposit and usage fee, the lessee must notify the Parks and Leisure Department five (5) business days prior to the event.

By signing the application below, I agree to abide by the following Terms and Conditions:

In consideration for rental of the premises, I understand, and agree to follow and comply with all above written guidelines which are incorporated herein by reference. Failure to comply with these guidelines will result in loss of privilege to use City facilities and will result in non return of deposit. I further understand that fundraising is not allowed on City property, and will not be using the facilities for that purpose unless I have written permission.

I accept responsibility of use of the City of Auburn Ballfields on the date(s) and hours stated on this form

Agreed to by:

Signature: _____	Date: _____
Print Name: _____	
Title: _____	

## RENTAL FEES ARE DESIGNED TO COVER COST OF UTILITIES AND MAINTENANCE

### RENTAL FEE

**Minimum weekend 2 hrs.**  
**Maximum weeknight 1.5 hr.**

AUBURN CITIZENS/NON-PROFITS  
\_\_\_\_\_ HRS X \$20.00 = \$ \_\_\_\_\_

NON-CITIZENS  
\_\_\_\_\_ HRS X \$25.00 = \$ \_\_\_\_\_

### LIGHTS

\$10.00 PER HOUR FOR USE OF LIGHTS

\_\_\_\_\_ HRS X \$10.00 = \$ \_\_\_\_\_

### FIELD PREP FOR GAME

DRAG AND RELINE THE FIELD

FIELD PREP FEE \$25

### CONCESSIONS

VENDOR FEE CHARGED IF CONCESSIONS ARE PROVIDED DURING RENTAL

VENDOR FEE \$100

### DEPOSIT

**\*SECURITY DEPOSIT REQUIRED\***  
**USE A SEPARATE CHECK FOR THE DEPOSIT (Only checks accepted)**

DEPOSIT 50% OF TOTAL RENTAL

RENTAL DUE	\$
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DEPOSIT DUE	\$
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**\*USE A SEPARATE CHECK FOR THE SECURITY DEPOSIT\***

TOTAL DUE	\$
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Date Payment Received: _____	Liability Insurance <input type="checkbox"/> YES <input type="checkbox"/> NO	Facility passed inspection? <input type="checkbox"/> YES <input type="checkbox"/> NO
Security Deposit Due: \$ _____	Rental Approved By: _____	Return Security Deposit? <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> CK# _____	Date Approved: _____	Return Date: _____ Staff Initials: _____
Rental Amount Due: \$ _____	Date of Rental: _____	Customer survey returned? <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> CASH <input type="checkbox"/> CK/MO# _____	<input type="checkbox"/> Posted on Calendar <input type="checkbox"/> Relay Date to Renter	