



**PBC Parks & Recreation Department**

**South County Civic Center**

16700 Jog Road

Delray Beach, FL 33446

Phone: 561-495-9813 Fax: 561-496-7483

**Facility Rental Request**

**Today's Date:** \_\_\_\_\_

**Please Check Box of Rental Space Requested:**

- Classroom    1 or  2    combined (1 & 2)
- ¼ Assembly Room    w/ kitchen    w/o kitchen
- ½ Assembly Room    w/ kitchen    w/o kitchen
- Full Assembly Room    w/ kitchen    w/o kitchen

\*\*\*\*\*

**Organization Name:** \_\_\_\_\_

**Organization:** Profit \_\_\_\_\_ or Non-Profit \_\_\_\_\_ If non-profit, provide documentation of 501 status.

**Tax Exempt:** Yes \_\_\_\_\_ or No \_\_\_\_\_ If yes, provide copy of tax exempt certificate.

**Contact Person:**  
\_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Cell Phone:** (\_\_\_\_) \_\_\_\_\_ **Home/Business Phone:** (\_\_\_\_) \_\_\_\_\_

**Primary Email Address:** \_\_\_\_\_

**Alternate Contact Person:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_

**Alt. Email Address:** \_\_\_\_\_

**Requested Date & Time** (please indicate a.m. or p.m.):

**Single Use:** Date \_\_\_\_\_ Hours: From \_\_\_\_\_ to \_\_\_\_\_

**Monthly:** Day of the Week \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**Event Hours:** From \_\_\_\_\_ to \_\_\_\_\_ **Set-up time:** From \_\_\_\_\_ to \_\_\_\_\_

Type of Event: \_\_\_\_\_ # of People Attending: \_\_\_\_\_

Set Up Style:     Banquet     Board Meeting     Theatre     Classroom     Other

**Program Information (please check all appropriate categories)**

- Private Function     Political     Food/Beverage Served  
 Meeting     Religious     Entertainment (please describe) \_\_\_\_\_  
 Educational     Fundraiser     Other (please describe) \_\_\_\_\_

**Check the appropriate activities for your event:**

- Admission or ticket charge     Event Advertising     Sales of food, beverages or merchandise

**Alcohol:**

Will you be serving alcohol at your event?  Yes\*     No    **\*Note: If Yes -Insurance Required**

Will you be selling alcohol at your event?  Yes\*     No    **\*Note: If Yes -Sales Permit & Insurance Required**

**Security:**

Is security needed at your event?  Yes     No  
Depending on event type, security may be required.

**Equipment Needs:**

- Podium     Microphone     Wireless Microphone     LCD Projector  
 Easel     TV/DVD Player     Coffee Urn(s)

**Vendors:**

List all vendors and the services they are providing for your event:

---

---

---

\*Vendors must provide proof of insurance naming Palm Beach County Board of County Commissioners as Certificate holder and Additional Insured. Additional coverage will be required if alcoholic beverages are sold.

**Please include any additional information not requested on the application.**

---

---



**PBC Parks & Recreation Department  
South County Civic Center**

**Policies & Regulation Statement:** I have received the five page South County Civic Center Facilities Policies and Regulations, have reviewed them, and agree to abide by them.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Rental Indemnification:**

“I, the Permittee, in consideration for using Facilities at South County Civic Center, agree to protect, defend, reimburse, indemnify and hold Palm Beach County, its agents, designees, employees, and elected officials free and harmless at all times from and against all claims, liability, expenses, losses, costs, damages, or causes of action of every kind and character, including attorney’s fees and costs, whether at trial or appellate levels or otherwise, arising during, as a result of or in connection with Permittee, its members, volunteers, participants, officials, agents, employees, subcontractors (hereinafter “Permittee’s Affiliates”) use of facilities at South County Civic Center. Permittee hereby assumes the risks associated with Permittee’s and Permittee’s Affiliates use of facilities at South County Civic Center.

In the event County shall be made a party to any litigation commenced against Permittee or Permittee’s Affiliates by Permittee or Permittee’s Affiliates against any third party, Permittee shall protect and hold County harmless and pay all costs and attorney’s fees incurred by County in connection with such litigation and any appeals thereof. This provision shall survive expiration or termination of this Permit.

This Permit shall be governed by the laws of the State of Florida, and is intended to be interpreted as broadly as possible. I, Permittee, agree that exclusive jurisdiction and venue against Palm Beach County, its agents, designees, employees and elected officials shall be in Palm Beach County. If any part of this Permit is determined unenforceable, all other parts shall remain in effect.”

X \_\_\_\_\_  
**Signature of Authorized Rental Representative      Printed Name      Date Signed**

**Group Name:** \_\_\_\_\_

**Rental Date:** \_\_\_\_\_ **Reservation #:** \_\_\_\_\_

**List person(s) responsible for ensuring all rules are followed on day of event (must be on-site during entire event):**

\_\_\_\_\_