



Rental # _____

FISHING TOURNAMENT PERMIT APPLICATION

(Complete if an organized fishing contest is scheduled for a Parks and Recreation managed facility)

APPLICANT INFORMATION

Please complete information below. If you already have an account enter your Login ID (if organization, use Login ID of authorized agent of Organization), Name and Phone Number, then skip to the TOURNAMENT INFORMATION Section.

Organization/Name _____ Login ID _____

Address _____ Town _____ State ____ Zip _____

Phone (H) _____ (W) _____

Contact Person (authorized agent) _____

Address _____ Town _____ State ____ Zip _____

Phone (H) _____ (W) _____ (C) _____

E-mail _____ Fax _____

TOURNAMENT INFORMATION

Facility _____

Date of event _____ Times of event _____

Estimated total attendance: (3rd grade & under ____ 4th-8th grade ____ 9th-12th grade ____ Over 18 ____ Chaperones ____)

Is there a participation fee? No Yes (If yes, a Vendor Permit is required.)

A. Is this a fund-raising event? No Yes (If no, skip to B.)

1. Will funds be collected on site? No Yes

2. Are you an IRS designated non-profit organization? No Yes

3. Are there any fees associated with this event? No Yes

4. Are you offering anything for sale? No Yes

B. Will there be paid vendors on site? No Yes (e.g. caterer, disc jockey, moon bounce, etc.)

C. Will any business be conducted on park property. (e.g. advertising and/or selling services/products, etc.?)

No Yes

Note: if "Yes" to A. - C., a Vendor Permit is required and additional fees may also be required. See Permits and Facility Rate Sheet

D. Will 75 or more people attend? No Yes (If yes, a Special Event Permit is required and must be submitted at least 20 days in advance.)

E. Is this event outside of normal facility hours? No Yes (If yes, a Special Schedule Permit is required.)

F. Are there special needs or equipment needed for accessibility? No Yes (If yes, a Special Needs Form must be submitted 72 hours prior to event.)

G. Will you need to leave equipment on the site during the rental period? No Yes (If yes, please complete the Equipment On-Site Form.)

Purpose of event _____

List Prizes, if any _____

See next page for Rules and Responsibilities



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RULES AND RESPONSIBILITIES

1. ALCOHOL - Alcoholic beverages are not permitted in, or on any Departmental facility or grounds.
2. PETS - Pets will remain on leash six feet or shorter, at all times. Pet excrement must be removed and placed in trash receptacle by owner. Except for ADA compliant animals, pets are not permitted inside buildings.
3. ORDINANCES - County Parks Ordinances are posted on park/center bulletin boards. Parks and Recreation and/or the County Board of Supervisors reserve the right to refuse a request or to cancel any activity if it is not in the best interest of the County or conflicts with Parks and Recreation philosophy.
4. RULES & REGULATIONS - Rules and regulations shall be adhered to by all persons representing rental group.
5. USER RESPONSIBILITY - Users agree to assume responsibility for any liability for injury or damage to their person or the property of the user or others, for injury or damage attributed to Fauquier County facilities, personnel and/or property. Fauquier County is not responsible for accident, injury or damage to or loss of property. Rental period will be observed to avoid additional charges of 50% of the base rental fee for each additional 15 minutes facility is used.
6. CLEANING - All users are expected to leave the facility clean and orderly. User is responsible for additional fees if Department incurs unexpected costs.
7. SAFETY - Users agree that safety and protection of all persons is paramount and assume the responsibility to ensure that use, installation, maintenance, and inspection of all equipment used and/or left on-site at facilities conforms to government and non-government (voluntary) safety standards and/or guidance as posted by the U.S. Consumer Product Safety Commission and the equipment manufacturer's instructions.
8. AMERICANS with DISABILITIES ACT - Parks and Recreation is committed to making its facilities accessible, usable, and user-friendly to persons with disabilities, and to further the concept of equal treatment for people with disabilities to the maximum extent possible consistent with the Americans with Disabilities Act. Therefore, applicants of Parks & Recreation facilities agree to make all reasonable accommodations for individuals with disabilities.

Everything that I have stated on this application is correct to the best of my knowledge. I understand that the Department will retain this application whether or not it is approved. I agree that while we use Parks and Recreation facilities we will not discriminate on the basis of race, creed, color, religion, disability, gender and age. I have read, understand, and agree to abide by the policies, rules and regulations as they pertain to the requested usage.

Signature of Applicant _____ Date _____

| | | |
|--|-------------------|------------|
| DEPARTMENT USE ONLY | | |
| Fee Accepted: _____ | By _____ | Date _____ |
| Regional Superintendent: _____ | | |
| Review/Comments: _____ | | |
| | | |
| Approval: Yes <input type="checkbox"/> No <input type="checkbox"/> | By Director _____ | Date _____ |