

APPLICATION FOR USE: Rondout Municipal Center

STEP 1: COMPLETE THE FOLLOWING - PLEASE PRINT

2024

Applicant's Name _____ Email _____
Daytime phone # _____ Evening Phone # _____ (Proof of residency required)
Name & Address Organization _____
Non-Profit? _____ NO _____ YES (Documentation required)

Type of Activity (dance, meeting, party, recreational activity etc.) _____

Is there a fee to attend this event? No Fee _____ Yes, the fee per person is: \$ _____ OR a suggested donation of \$ _____

Day / Dates Requested: _____

(MAY NOT BE AVAILABLE New Year's Eve/New Year's Day; Memorial Day; Independence Day; Labor Day; Thanksgiving Day; Xmas Eve/Xmas Day.)

Time Desired – Please Include Preparation Set-Up and Clean-Up Time Needed: _____

(Please note the curfew for scheduled events: All activities must be finished, and doors locked by 10:30 pm)

Anticipated Attendance (Do not exceed **MAXIMUM OCCUPANCY**)

Adult Chaperones are required.

M1 (Meeting Room; 50 max): # of Adults _____ # of Minors _____ Cafeteria (106 max): # of Adults _____ # of Minors _____

M15 # (Meeting Room; 25 max): # of Adults _____ # of Minors _____ Kitchen Use: Yes _____ No _____

Gym (249 max): # of Adults _____ # of Minors _____

SEE PAGE 2 TO DETERMINE YOUR RENTER CLASSIFICATION. (Commission determines classification)

	Group A	Group B	Group C	Group D	Group E
Cafeteria Party/Event Space	NO CHARGE	\$20 2 Hr. Maximum	Four Hour Slot \$60.00 8hr. slot = \$120.00	4 Hours \$125, 8 Hours \$200 (plus gym \$20)	\$60 per Hr. 2 Hr. Minimum
KITCHEN	NO CHARGE	\$30	\$60	\$100	\$150.00
Meeting Room or Outdoor Grounds 4 HOUR USAGE	No CHARGE	Two Hour Slot \$20	2hr. slot = \$25.00 3hr. slot = \$30.00 4hr. slot = \$40.00	\$20.00 per hour 2-hour Min 8 hours max	Four Hour Slot \$120.00 Eight Hour Slot \$240.00
Gym	No CHARGE	\$20/hour	Full Court \$25.00	8-hour	Full Gym <u>\$120.00</u> For Profit Use \$500/day use

STEP 2 : SIGN APPLICATION: YOU MUST READ THIS PAGE AND RULES & REGULATIONS ON PG. 2 BEFORE SIGNING

I hereby certify that I have read and understand the Town of Rosendale/Marbletown Recreation rules and policy on Page 2 and agree that they are made a part of this agreement by reference and that I will abide by the same. I agree to assume responsibility for any damage to the building, furniture, and/or equipment occurring during the occupancy of the facility and all clean-up in accordance with my requirements. All damage sustained to the above shall be compensated within five days (5) days of notice of payment due. I also understand that I may forfeit future opportunities to use it. the Municipal Center if I do not meet this responsibility. I further understand that Town management may check the facility during and immediately after my event for cleanliness and/or damage. If I must cancel, two weeks' notice is required for a full refund. By signing the application form, I and my group agree to follow all rules and regulations. Furthermore, I and my group agree to indemnify and hold harmless and defend the Town of Rosendale and the Town of Marbletown, its officers, agents, servants and employees from all claims resulting from injuries, damages and losses sustained by me or my group because of the use of this facility and its adjoining property. I understand that in the event of an emergency, the Town of Rosendale/Marbletown or its Representatives may cancel any activities previously scheduled.

SIGNED: _____ PRINT NAME: _____ DATED: _____

APPLICANT MUST BE 21 YEARS OR OLDER AND IS RESPONSIBLE FOR ENFORCING THE RULES AND REGULATIONS

STEP 3: Send signed application with 1) Rental Fee and 2) Clean-Up Deposit Fee to: Rondout Municipal Center. NO CASH PLEASE. Make checks or money orders payable to: Rondout Municipal Center. Mail application with payment to: Rondout Municipal Center, 1915 Lucas Avenue, Cottekill NY 12419. Please note that all checks are deposited at the time application is approved. Clean-up Deposit will be reimbursed after a satisfactory inspection of the premises.

Contact Rondout Municipal Center Building Manager at 845-417-3457 with urgent concerns and key pick up.

FOR OFFICE USE ONLY

Clean-Up Deposit Rec'd \$ _____ Check # _____ Date: _____ / Rental Fees Rec'd _____ Check # _____ Date: _____

Approved by the RMC Building Manager _____ Date: _____

PLEASE RETAIN THIS PAGE FOR YOUR INFORMATION

Group Classifications

*Please note that the RMC Management or the Town Board makes the final determination of a renter's classification.

Group A: Town of Rosendale/Marbletown events or meetings.

Group B: Private use under 2 hours of Rosendale/Marbletown philanthropic, civic, social organizations, religious orders & schools not charging entry fees.

Group C: Rosendale/Marbletown resident: private parties; public meetings / forums, banquets or social events not charging entry fees. Rosendale/Marbletown-based philanthropic organizations, political parties, or individual candidates requiring an entry fee.

Group D: Non-resident private parties, meetings, banquets or social events not charging entry fees. Business or commercial & non-resident events hosted by philanthropic organizations, political parties or individual parties requiring an entry fee.

Group E: Business meetings. Final determination of fees for public events requiring a site plan will be made by the Commission.

Rules & Regulations

BE CONSIDERATE of others who may be using the facilities during your rental and respect the facilities as property of the Rosendale/Marbletown community.

- 1) THE APPLICANT IS RESPONSIBLE FOR ENFORCING the Rules and Regulations AND MUST BE PRESENT AT FUNCTION. The applicant group is responsible for compensation for property damage. Applicant is responsible for leaving the building clean - broom swept and/or vacuumed, counters and tables wiped off. The kitchen must be swept and mopped, the counters, shelves and tables wiped off. Please take the garbage out. All areas are to be returned to their original state upon completion of your event. Thank you for your consideration!
- 2) Alcohol will be permitted at events, pursuant to prior approval. Additional deposit and insurance is required. NO DIRECT SALE OF ALCOHOLIC BEVERAGES IS PERMITTED on this property.
- 3) NO SMOKING in any indoor buildings or on any Municipal property; The Playground is a NO SMOKING area. This includes vaping, e-cigarettes, marijuana, etc.
- 4) MUSIC may be played so as not to be a nuisance to other patrons. You will be required to turn off music that is deemed profane or obscene by any Town personnel. Music will be limited to designated areas and volumes.
- 5) FURNITURE AND EQUIPMENT is not to be moved without Municipal approval. No indoor furniture and equipment may be moved outside of the facility.
- 6) Please do not touch the THERMOSTATS or ALARM SYSTEM.
- 7) DO NOT HANG ANYTHING on the walls or ceiling by any means: including tape, tacks or string without Municipal approval.
- 8) There are no provisions for renters to STORE ITEMS prior to or after rentals. The Town of Rosendale/Marbletown assumes no responsibility for PERSONAL PROPERTY brought into the building.
- 9) Please do not exceed your DESIGNATED RENTAL TIME. (\$20 per hour is charged for those not vacating the premises on time. This includes set-up and clean-up time.)
- 10) BEHAVIOR deemed destructive shall be cause for eviction of participants from the premises and may be cause for legal action. Renters are responsible for ensuring all activities are properly supervised. ADEQUATE ADULT CHAPERONES are required for attendees under 18.
- 11) All activities require the applicant to obtain & submit a CERTIFICATE OF INSURANCE & special event riders as deemed appropriate.
- 12) PARKING: No vehicle shall be driven or parked on any portion of the grounds other than established roadways and designated parking areas. No parking on the grass!
- 13) **NO SMOKE MACHINES ALLOWED, no candle centerpieces, no straw, shavings or confetti, no bouncers allowed.**
- 14) Please return all chairs and tables to the way you found them. Please take out the garbage and sweep the floor. Turn off the lights and lock the doors before you leave.

INSTRUCTIONS TO PICK UP AND RETURN KEYS

You may pick up the key/FOB to the building at **Marbletown Supervisor's office or RMC Building Manager's office between 9 a.m. and 4 p.m. Monday through Friday**. Town Hall maybe closed during a holiday preceding your event. Please call Town Hall at 845-658-3159 or 845-687-7500 to verify it will be open to pick up your key/FOB. You will receive your **CLEAN-UP CHECKLIST** with your keys. Return the completed and signed CLEAN-UP CHECKLIST with the keys **Keys/FOB must be returned in the hanging black drop box by the Marbletown entrance after use.**

If there is clean-up or damage that exceeds the clean-up deposit fee, additional fees may be charged to Applicant/Group.

Please make sure all **DOORS ARE CLOSED AND LOCKED when event is over.**

Contact Rondout Municipal Building Manager at 845-417-3457 with questions or emergencies.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/30/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER AGENCY NAME 123 MAIN ST BURBANK CA 91502	CONTACT NAME: AGENT NAME PHONE: _____ (A/C No Ext): _____ E-MAIL ADDRESS: _____ FAX: _____ (A/C No): _____
INSURED INSURED NAME 123 MAIN ST BURBANK CA 91502	INSURER(S) AFFORDING COVERAGE INSURER A: INSURANCE COMPANY NAME INSURER B: _____ INSURER C: _____ INSURER D: _____ INSURER E: _____ INSURER F: _____
	NAIC # 12345

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY						EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COM/PROP AGG \$ 2,000,000
							COMBINED SINGLE LIMIT /Ea accident \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE /Per accident \$	
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
							\$
	DED						
	RETENTIONS						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS/LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

RMC is listed as additionally insured with respects to liability as required by written contract on a primary and non contributory basis for the rental and use of Town property on -----date(s)

CERTIFICATE HOLDER

CANCELLATION

RMC
1915 LUCAS AVE
COTTEKILL, NY

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE