

St. James POA

AMENITY RESERVATION REQUEST FORM

Event Date / Time : _____ / _____ Event Name: _____

Sponsor/Owner's Name: _____ SJ Street Address: _____

Email: _____ Cell#: _____

If any, Sponsoring Group or Charity's Name: _____

Requested Reservation:

Venue (check one): Waterway Park Pavilion Woodlands Pavilion
 Amphitheater Beach Club

Start / Finish (between 7am/9pm): _____ / _____ No. of Guests: (range): _____ – _____

Describe your event in detail, e.g. birthday party, neighborhood party, group or club event, charity fundraiser. Describe activities & entertainment. Use additional pages if needed:

Will tickets be sold, fees be charged? Y / N Will donations be accepted? Y / N

- If the answer is yes to either of the above, on a separate sheet, provide a budget for the event and sources and uses of funds collected, including proposed use of net proceeds.

Name of Band or D.J. : _____
(dB levels may not exceed 65 in the street surrounding the park.)

Tents or Play Structures? Y / N If yes, specific insurance requirements apply.

Will Alcohol* be permitted at the event? (check one): Y / N

If Yes, please answer the following alcohol related questions: (check one):

- Will the host be providing the alcohol? Y / N (if Yes, see NOTE 1, below)
- Served by Self Service or Professional Staff? **Self** / **Prof. Staff**
- Will BYOB be permitted? Y / N
- Will alcohol be available for purchase? Y / N
- Will any participants be under the age of 21? Y / N
- *** Sale or distribution of alcohol must be registered with the NC Alcohol Beverage Control Commission. Permit # _____ (attach copy of permit).**
- BYOB-Only: no permit required.

NOTE 1 : If alcohol will be provided by the event host, group, a vendor or charity, a Certificate of Insurance evidencing Liquor Liability Insurance coverage must be provided to St. James Plantation P.O.A with St. James Plantation P.O.A named as an "Additional Insured as required by contract" for the event. This is required to secure your reservation.

Conditions

- **A \$100.00 Refundable Deposit** (check payable to St. James Plantation POA) must be submitted at the time of the reservation request. This deposit will fund any clean-up or damage repair beyond normal wear.
 - **Immediately after the Reserving Party has cleaned-up, they must contact St. James Security 910-253-7177 for an Inspection.** The Refundable Deposit check will be shredded upon receipt of a satisfactory clean-up report. Any costs incurred by the POA for cleaning or damages will be deducted from the Refundable Deposit. If the costs associated with clean-up and/or damages exceed the \$100 Refundable Deposit amount, they will be charged directly to the property owners' POA account.
 - **I have received and read the POA Amenity Reservation Rules & Policies** and agree to abide by these Guidelines for the above event. I understand that I must always be present during this event. ***I understand that I am responsible for all guests in attendance.*** I acknowledge that I will be held responsible for the proper use, care and clean-up of the Amenity area used during this event. Guests, caterers, band members, etc. arriving from outside St. James will be registered through the normal visitor management software as personal guest(s) of a property owner(s).
 - **I have received the Security Inspection Card** and understand that I must contact Security immediately after clean-up of the event. Failure to do so may result in forfeiture of the deposit. This reservation is for personal use of the individual or named group and not for the use of any outside individual or entity, not to financially benefit any for-profit entity. I agree to be responsible for any theft and all damage to POA property and will reimburse the POA for the cost of replacement / repairs necessary to restore the facility to its original condition.
 - **INSURANCE:** If Alcohol is provided at the event, whether sold or served as a part of the event, a certificate of insurance, evidencing a minimum of \$1MM Liquor Liability Insurance coverage must be provided, with St. James Plantation POA, Inc, 4140 Southport, Supply Rd. Southport, NC 28461 named as an "Additional Insured as Required by Contract" for the event.
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Acceptance of Conditions & Hold Harmless Clause

I, _____ accept the Conditions, above, and shall hold-harmless, defend and indemnify the St James Plantation POA, it's Directors, Officers, Agents, Members and Volunteers from any and all claims, actions, suits, charges and judgements whatsoever arising out of this event held on POA property.

Signature Property Owner: _____ **Date:** _____

Signature of Charity Representative: _____

Printed Name: _____ **Date:** _____

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- **POA Office Use Only:** Check No: _____ Check Amt: _____ Check Date: _____
 - Certificate of Insurance received with St. James Plantation P.O.A. as an Additional Insured– Date: _____
 - Alcohol Permit, if required, received on, Date: _____ Reservation Email sent on, Date: _____
 - Revised 08
 - 8/14 DRAFT