



# Pavilion Rental Request and Use Agreement

## Wicomico County Department of Recreation, Parks and Tourism



**Pavilion rental requests must be approved and paid for 14 days before the rental date.**

Organizer: (Individual Responsible): \_\_\_\_\_

Group/Organization/Company: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Event Type: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ # of Guests: \_\_\_\_\_

**Select your Pavilion:**

<input type="checkbox"/> Pirate's Wharf	\$250	<input type="checkbox"/> Nanticoke Park (Portalets)	\$ 65
<input type="checkbox"/> Adkins Mill Park	\$ 135	<input type="checkbox"/> Emerson Holloway (No RR)	\$ 65
<input type="checkbox"/> Billy Gene Jackson Park	\$ 190	<input type="checkbox"/> Nick Meyer Park (Portalets)	\$ 65
<input type="checkbox"/> Cedar Hill Park	\$ 160	<input type="checkbox"/> Cedar Hill – Small (Restrooms)	\$ 65
<input type="checkbox"/> Leonard's Mill Park (Pit Toilets)	\$ 190	<input type="checkbox"/> Indian Village (Restrooms)	\$ 65
<input type="checkbox"/> Schumaker Park	\$ 190	<input type="checkbox"/> San Domingo (Portalets)	\$ 65
<input type="checkbox"/> Winter Place Park	\$ 190	<input type="checkbox"/> Tyaskin Park (Portalets)	\$ 65
<input type="checkbox"/> Ball Field/Court: 2hr	\$ 10	<input type="checkbox"/> Other	TBD

*\* There are no price discounts for non-profits or organizations. Fee waivers may be granted by Department administration.*

**PAVILION ACCESS**

- Rental time (including setup) must not be earlier than 10 a.m. unless a special permission is granted by the Department. Bathrooms may not be opened prior to 10 a.m.
- Rental of a pavilion grants you access to the pavilion space and nearby open space including grills.
- The park facility is not closed to the general public during a pavilion rental without special permission by the Department.
- Rental does not include ball fields or courts. These can be rented for an additional fee based on availability.
- All parks have restroom facilities unless noted otherwise.
- Concession areas are not included in any rental.

**SPECIAL CONDITIONS**

- Will you charge admission? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Do you intend to have alcoholic beverages? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Will you be using stakes (for tents, bounce houses, etc)? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Will you have outside vendors (food, craft, commercial)? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Other special conditions? \_\_\_\_\_ Yes \_\_\_\_\_ No

Conditions: \_\_\_\_\_

Note: If you answered "yes" to any of the Special Conditions, the Department will review your application and additional fees may apply. All rental conditions must adhere to the County Parks Rules and Regulations unless special permission is granted by the Department. Rules and Regulations are available on [www.wicomicorecandparks.org](http://www.wicomicorecandparks.org).

**CANCELLATION POLICY** Refunds in case of cancellation will be granted, if requested 3 weeks before the desired date. All refunds are subject to a 10% service charge. Refunds will not be granted when an activity is cancelled due to inclement weather. In this case, another date may be scheduled based on park availability.

**SITE INSPECTION** Upon completion of the activity, a site inspection will be held. If the facility is damaged or requires pick-up of litter, the Organizer and/or group that used the facility will be assessed the actual cost for returning the facility to the original condition. **The actual cost will include labor at the rate of \$60 per hour and all repair expenses.** This fee must be paid within 30 days or the Department will begin collection proceedings and the Organizer/group will be precluded from future park and pavilion usage.

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**Facility Guidelines:**

**FACILITY USE** The facility must only be used for the purposes specified in this Agreement. The Organizer agrees to comply with all state, county, and municipal orders and regulations. Disorderly conduct is not allowed. Failure to use the facility in conformity with the purposes specified in this Agreement will be considered a violation of this Agreement. If a violation of this Agreement occurs, the County may terminate this Agreement and immediately re-take possession of the facility.

- The Organizer or organization must not make any alterations, install equipment, or make attempts to maintain facilities except for trash cleanup. The facility must be returned to its normal condition except for normal wear.
- The Department of Recreation, Parks & Tourism may restrict groups from providing alcoholic beverages on its premises. In all cases, when such requests are approved, it is the responsibility of the organization to adhere to the rules and regulations of the Wicomico County Liquor Board.
- Groups must observe the approved times for beginning and ending their activity as requested in this Agreement.
- Camping and campfires are not allowed on Park Property. Fires for cooking must be confined to the barbecue grills only.
- All trash must be disposed of in the provided receptacles.
- The Department of Recreation, Parks & Tourism may refuse or cancel this agreement for any reason.
- Organizer must not assign any interest in this Agreement to anyone without the prior written consent of the Department.

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**RELEASE AND INDEMNIFICATION:** Organizer releases the County from all claims against the County arising from the use of the site and assumes all risks associated with the rental. Organizer must indemnify the County and its agents against all claims arising from Organizer's use of County facilities. Organizer accepts the site "AS IS".

**UNDERSTANDING AND SIGNATURE:** Organizer has been provided a copy of this Agreement and has made the members of its organization familiar with the County's policies for its facilities. Organizer accepts full responsibility on behalf of its organization for the use of County facilities and for any damages to them.

**Organizer Name** \_\_\_\_\_ **Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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**Approval:**

**d**

Approved

Approved with the following changes/conditions:

\_\_\_\_\_  
\_\_\_\_\_

Not Approved

**Department Signature** \_\_\_\_\_ **Date** \_\_\_\_\_