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Festival and Event Application Form

Submission of this application constitutes a request to use County property for the purpose of a Special Event and does not guarantee event approval. To avoid any misunderstanding, please read the "Festival and Event Approval Process Guidelines."

							· · · ·
Part 1: EVENT I							·
	Caledonia Victoria Day Fir						· · · · · ·
Name of Spons	or Organization: Caledonia	Regional (	Chamber c	of Commerc	е		
Type of Organiz	ation:		<u></u>				
🖬 Non-I	Profit	□ Priva e first	ate	Commerc	ial		
Mailing Addres	s (street, town & postal code	e):				-	
1 Grand Trunk	Lane, Box 2035, Caledor	nia, ON, N3	W 2G6				
Website for eve	ent details: TBD	, <u>, , , , , , , , , , , , , , , , </u>					
Type of Event:							
🗆 Chari	Walk/Ride Sporting E table – Proceeds to Benefit: r (please specify): t: •Yes No An	<u> </u>			Profit mission Fe	es: Ye	s No
Anticipated Att			Construction of the local data		f		Territoria de la constante de la const
	endance:3000 # d	of years held	: This is th	e first	per Entry	per Al	traction
Event Date(s), I Please specify eac	endance: 3000 # 0 .ocation(s), Time(s): h park you are requesting as well up and take from date(s) and tim	as the specific ne(s) if differen	locations in t from event	each park. dates.			
Event Date(s), I Please specify eac	<pre>-ocation(s), Time(s): h park you are requesting as well</pre>	as the specific pe(s) if differen Set	locations in t from event Up	each park. dates. Event	Time	Take	Down
Event Date(s), I Please specify eac Please include set	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location	as the specific be(s) if differen Set Start	locations in t from event Up End	each park. dates.	Time End		
Event Date(s), I Please specify eac Please include set Dates	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park	as the specific pe(s) if differen Set	locations in t from event Up	each park. dates. Event Start	Time	Take Start	Down End
Event Date(s), I Please specify eac Please include set Dates Sunday May 20, 2018	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park	as the specific pe(s) if differen Set Start 1400	locations in t from event Up End	each park. dates. Event Start 2000	Time End 2300	Take Start 2300	Down End
Event Date(s), I Please specify eac Please include set Dates Sunday May 20, 2018	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park	as the specific pe(s) if differen Set Start 1400	locations in t from event Up End	each park. dates. Event Start 2000	Time End 2300	Take Start 2300	Down End
Event Date(s), I Please specify eac Please include set Dates Sunday May 20, 2018	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park	as the specific pe(s) if differen Set Start 1400	locations in t from event Up End	each park. dates. Event Start 2000	Time End 2300	Take Start 2300	Down End
Event Date(s), I Please specify eac Please include set Dates Sunday May 20, 2018	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park	as the specific pe(s) if differen Set Start 1400	locations in t from event Up End	each park. dates. Event Start 2000	Time End 2300	Take Start 2300	Down End
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Event Date(s), I Please specify eac Please include set Dates Sunday May 20, 2018 Sunday May 20, 2018	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park	as the specific oe(s) if differen Set Start 1400 N/A	locations in t from event Up End 2000	each park. dates. Event Start 2000 2000	Time End 2300 2300	Take Start 2300 N/A	Down End
Event Date(s), I Please specify eac Please include set Dates Sunday May 20, 2018 Sunday May 20, 2018	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park Forfar Park (at Mill) inclement weather, will the	as the specific oe(s) if differen Set Start 1400 N/A	locations in t from event Up End 2000	each park. dates. Event Start 2000 2000	Time End 2300 2300	Take Start 2300 N/A	Down End
Event Date(s), I Please specify eac Please include set Dates Sunday May 20, 2018 Sunday May 20, 2018	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park Forfar Park (at Mill)	as the specific oe(s) if differen Set Start 1400 N/A	locations in t from event Up End 2000	each park. dates. Event Start 2000 2000	Time End 2300 2300	Take Start 2300 N/A	Down End
Event Date(s), I Please specify eac Please include set Dates Sunday May 20, 2018 Sunday May 20, 2018	Location(s), Time(s): h park you are requesting as well up and take from date(s) and tim Park and Location Caledonia Kinsmen Park Forfar Park (at Mill) inclement weather, will the	as the specific oe(s) if differen Set Start 1400 N/A	locations in t from event Up End 2000	each park. dates. Event Start 2000 2000	Time End 2300 2300	Take Start 2300 N/A	Down End

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Brief description of event:	
Victoria Day Fireworks Display, and an entertainment stage with a	a local musicians performing.
For returning events, please list changes in activities for this year's ev	ent:
N/A	

Part 2: APPLICANT INFORMATI	ON	
	Primary Applicant	Alternate Applicant
Name:	lan D. Thompson	Barbara A. Martindale
Position within sponsor organization:	Chair	Executive Director
Preferred Contact Number:		9057650377
E-mail Address:		info@caledonia-chamber.com
Can this information be shared with the public?	Yes No	Yes No

Mayor Ken He		nt. Councillors will respond as available.
Ward 3: Cour		□ Ward 4: Councillor Tony Dalimonte
Ward 5: Cour	cillor Rob Shirton	Ward 6: Councillor Bernie Corbett
Date Requested:	May 20, 2018	
Time Requested:	21:45	
<b>Requested Level of Part</b>	icipation (i.e.: Opening remar	ks, parade):
To provide openina rer	marks prior to Fireworks.	
· · · · · · · · · · · · · · · · · · ·		

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	En		gency Servi	-	iedical s	FI	re	e Depa	rtr	nent			OF	P	
Participation in Parade:		Π	Yes		No	Γ		Yes		No			Yes	-	No
Public Relations or Display:		Π	Yes	-	No	1	_	Yes		No			Yes		No
Additional Assistance – user for	ees or se	rvi	ce ch	an	zes may a	ylagi			<u>.</u>		i			لتمتأ	
Bike Medics		1	Yes	Γ	No	18-2-18-6-1-4-7	40		на Не					1741	
Ambulance		Π	Yes	-	No			9 <u>1</u> 11241) 1214141	始日 復日						
Paid Duty Officers								Step se Mere Q			(coi	nta	Yes Ct Ol	- الم	]No directly)
Part 4: SAFETY PLAN										·····	••••••••••••••••••••••••••••••••••••••				

How will event officials be identified:	· · · · · · · · · · · · · · · · · · ·
Lanyards	
Please identify the safety measures that will be in place for the event:	
First Aid:	
Bike Medics Requested.	
Will additional first aid provisions be available:	
St. John's Ambulance of site     Gertified first alders on site	
Crowd Control:	
Volunteers on-site	:
Security:	
Volunteers on-site	
Will an external security company be on site: Yes I No If yes, please provide company name:	
Parking:	
N/A public parking available on-street and in public lots.	
Traffic Control:	······································
N/A	
Other (please specify):	
N/A	
	·····

f yes, please describe: Use of Outdoor Cooking Equipment	Required: S		Permit (SOP), re	rea, etc.) equires a Municipally Significant mits can be found at: <u>www.ag</u> e		Ye:
Attendance   Attendance     Attendance	yes, pleas	e provide the date	es and times o	f sale and service of alcohol:		
Food (e.g. BBQ, pre-packaged snacks, bottled water, food vendors, etc.)   Required: Haldimand Norfolk Health Unit Event Organizer Form and Food Provider Form which can   re found at: www.hnhu.org and search Food Safety at Special Events   Fyes, please describe:   Use of Outdoor Cooking Equipment   equired: Special Event Fire Safety Requirements Form	Date	Start Time	End Time	Area/Location		
Food (e.g. BBQ, pre-packaged snacks, bottled water, food vendors, etc.)   equired:   Haldimand Norfolk Health Unit Event Organizer Form and Food Provider Form which can   e found at:   www.hnhu.org   and search Food Safety at Special Events   yes, please describe:   Use of Outdoor Cooking Equipment   equired:   Special Event Fire Safety Requirements Form						
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equired: Special Event Fire Safety Requirements Form	:quirea: ⊓	iaidimand Nortoik	Health Unit Fv			
	e found at:	www.hnhu.org a	nd search Foo	d Safety at Special Events	rovider Form which can	No
yes, please specify type, etc.:	yes, pleas yes, pleas Jse of Out	www.hnhu.org a e describe: door Cooking Equ	ipment	d Safety at Special Events		Yes
	Use of Out equired: Sp	www.hnhu.org a e describe: door Cooking Equ ecial Event Fire Safe	ipment ity Requirement	d Safety at Special Events		Yes
	Use of Out equired: Sp	www.hnhu.org a e describe: door Cooking Equ ecial Event Fire Safe	ipment ity Requirement	d Safety at Special Events		Yes
	Jse of Out equired: Sp	www.hnhu.org a e describe: door Cooking Equ ecial Event Fire Safe	ipment ity Requirement	d Safety at Special Events		Yes

*Temporary Structures (e.g. tents, sun shelters, stage, bleachers, climbing wall, portable washrooms, etc.)	Yes
A building permit is <i>required</i> for a single tent or group of tents whose aggregate area exceeds 60 m <sup>2</sup> (646 square feet), is attached to a building or is constructed closer than 3 m (10 feet) from other tents or structures.	No
<b>Required:</b> Special Event Fire Safety Requirements Form to be submitted for tents or temporary structures requiring permits.	
If yes, please list type of structure, quantity and dimensions:	
Portable stage- owned by Caledonia Fair. Dimensions to be provided at a later date.	
*Use of County Roadways and Sidewalks (e.g. parade, soap box derby, runs, bikes, walks, etc.) Required: Traffic Control Plan for Special Events required for temporary road closures.	Yes No
If yes, please describe:	
	· · · · · · · · · · · · · · · · · · ·
*Live Entertainment	Yes
If live or recorded music is included in the event activities, the Event Organizer is responsible for the SOCAN license fees. SOCAN is the Society of Composers, Authors and Music Publishers of Canada.	No
If yes, please specify type (e.g. musician, magician, etc.)	
Musicians on-stage.	
*Amplified Sound	Yes No
If yes, please describe:	1 <u></u>
Musicians on-stage.	

*Fireworks/Pyrotechnics Display		Yes
Vendor must submit required paperwork to the Fire Departr	nent.	No
If yes, please describe:		nd
Fireworks performed by Kerr-Boom.		
		f Instructural
*Games of Chance, Lotteries, Raffles, etc.		Yes
Contact Haldimand County at 905 318 5932 ext. 6351 for requirements.	or information regarding licensing	Mo
If yes, please describe:		
*Other (e.g. vehicle access in park, petting zoo, closure	of public amenities such as boat ramp, etc.)	Yes No
If yes, please describe:		.1_,
Closure of accessible fishing dock above dam for f of Kinsmen Park for loading/unloading.	ireworks launching. Vehicles to drive into I	Dam ar <del>e</del> a
# of picnic tables requested: 0	# of garbage cans requested: 10	

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## Part 6: INSURANCE REQUIREMENTS:

Festival or Event Organizers must submit a Certificate of Insurance (COI) that shall be maintained in full force and effect throughout the festival or event (including set up and tear down). Higher limits and different types of insurance may be required depending on the nature of the event.

## At a minimum, the COI shall contain the following requirements:

Commercial General Liability in the amount of not less than two million dollars (\$2,000,000)
Occurrence Based Coverage
Cross Liability & Severability of Interest Clauses indicated as included under the CGL
Haldimand County named as an Additional Insured
Description of the event/activity for which the insurance applies
Dates and Times of Events
30 days notice of cancellation or alteration
Policy number, policy period, name and address of Insurer
Liquor Liability Coverage if the event involves the sale or serving of alcohol
Signature of Authorized Representative

## Insurance Options:

Option 1:

I/We will be securing insurance through our own insurance provider and providing a Certificate of Insurance to the County for this Event which meets the mandatory requirements listed above.

## \*Please have your insurance representative review the checklist above prior to issuing the Certificate of Insurance.

Option 2:

[]/We believe the Event meets the criteria listed below and wish to apply to be covered under the Haldimand County Special Event Insurance Policy.

Festivals or Events that meet ALL the requirements listed below, may qualify for Haldimand County Special Event Insurance:

- The event is mostly, if not all, held on County owned property
- The event is sponsored by a volunteer, not-for-profit organization
- The event is held on an annual recurring basis
- The event is for the benefit of the general public, as opposed to a specific target audience
- The event contributes to community vibrancy and may encourage tourism
- The event is not for the purpose of fundraising
- The main event is free of admission charges
- Funding of the insurance for an event does not create an inconsistency with other similar events held on property not owned by the County

1.	Insurance Period (include set up & tear down):	
	Effective Date:	Time: 🗌 AM 🗍 PM
	Expiry Date:	Time: AM [] PN
2.	Has the Event Organizer ever received a claim? If yes, please provide details:	Yes No
3.	Name of Current or Previous Insurance Carrier:	
4.	Has any company denied or cancelled coverage If yes, please provide details:	Yes No
5.	Do you verify that all information provided in the knowledge?	nis Application is correct, to the best of your

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#### **INDEMNIFICATION/HOLD HARMLESS AGREEMENT**

On behalf of the sponsoring organization, with its authorization, 1 shall indemnify and hold harmless Haldimand County, its Mayor, Councillors, officers, directors, employees, agents, representatives, successors and assigns, from and against any and all claims, causes of action, demands, losses, costs, charges, fees, expenses, duties, dues, accounts, covenants, or other proceedings of every kind or nature whatsoever at law or in equity brought against, suffered by or imposed on Haldimand County including reasonable legal fees, occasioned wholly or in part by any negligent acts or omissions by the Sponsoring Organization, their officers, agents, employees, volunteers or others for whom they are responsible at law, arising out of any cause whatsoever, either direct or indirect, through its use and/or operation of Municipal property in connection with the Festival or Event which is the subject of this application.

	Primary Applicant	Alternate Applicant
Signature:		<i></i>
Print Name:	lan D. Thompson	Barbara A. Martindale
Position:	Chair	Executive Director
Date:	2018-02-11	2018-02-11

## **EVENT APPLICATION**

I have read the terms and conditions as outlined in the guidelines and on this application and fully disclosed all details and components of the proposed event.

I will abide by all terms, conditions and regulations as indicated on the applications required.

I am aware that failure to comply as outlined could lead to cancellation of this application and/or my event at any time.

	Primary Applicant	Alternate Applicant
Signature:		
Print Name:	lan D. Thompson	Barbara A. Martindale
Position:	Chair	Executive Director
Date:	2018-02-11	2018-02-11

## **Festival & Event Application Form Checklist:**

A completed Festival & Event Application includes:

- A completed application
- I A detailed map or site plan clearly and accurately identifying locations of tents, temporary structures, stages or bleachers, storage of propane, fuel or hazardous materials, emergency access, food vendors, Bavarian gardens, any enclosed fenced area, portable washrooms, fireworks displays, etc.
- ☑ Certificate of Insurance (COI) meeting the requirements herein TO be provided by
   ☑ Facility Rental Application
   ☑ Signed Indemnification/Hold Harmless Agreement

- Signed Event Application

And additional forms as required:

- $\Box$  Submitted separately: HNHU Special Event Organizer Application Package N//2
- $\Box$  Submitted separately: HNHU Special Event Food Provider Application Package(s) N/A
- $\Box$  Submitted separately: AGCO Special Occasion Permit Application required for events with alcohol  $\mathbb{N}//\mathbb{A}$
- $\Box$  Community Event Trailer Request M/A
- Traffic Control Plan for Special Events
- Special Events Fire Safety Requirements Form
- $\Box$  Installation of Cross Road Banner Request  $\mathbb{N}/\mathbb{A}$
- Digital Reader Boards Announcement Request (if applicable)
- **Z** Tourism Free Listing Form (if applicable)

## Please return completed application packages to:

Haldimand County Attention Lynda Kissner, Supervisor Community Programs & Events 45 Munsee Street N, PO Box 400 Cayuga, ON NOA 1E0

## For further information and assistance, contact Lynda Kissner:

By phone: 905 318 5932 ext. 6134 or by email: lkissner@haldimandcounty.on.ca

## All required forms can be found on the Haldimand County website at:

HaldimandCounty.on.ca **Residents Tab Festivals and Events Planning a Special Event** 



## FACILITY RENTAL APPLICATION

Haldimand County Community Development & Partnerships 3-100 Haddington Street, Caledonia, ON N3W 2N4 Telephone (905) 318-5932 ext. 6507; Fax (905) 765-5716 <u>cwhittle@haldimandcounty.on.ca</u>

Applicant:	1 XAN XAN (**)			venta Da 1			
1011 D. ITCOMPERT (PCAEDO) Chamber 04(CA					ictoria l	Lay 1-1	remortis
IGRAND	26	Postal Code: N & W & G G					
Phone: E-mail:				<u>_</u>		FAX:	
Alt. Phone: (1)(6) 705 C Alternate Contact: 000 C							
Alternate Contact: BARBARA MARTINDALE Phone: 4057650377 E-mail: 10702 Calpdonia - CNOMBAR. LOM							
Facilities Requested							
1. CALEDONIA	PARK	Date(s) MOH	201	2018	Hours 1400 —	0000	
2 FORFAR PP	M:11)	Date(s) M&M	J-0	12018	Hours	- 2300	
A RAIN DATE		Ďate(s)		,	Hours		
Number of Participants	check one): Food			Non-Alcohol	ic Drinks (pl	ease check one):	
<u>- 3000</u> +	ierved Sold None						
Age of Participants Details:							
Youth (under 18)							
Adult <u>×</u> (18+)	-			<u>.</u>			
<u>SPORTS</u>		ARENA ROOMS/	LOOR		PARK R	ENTALS	
Arena Ice:	Personal:			Pavilions/Gazebos/Ball Diamonds:			
Recreational Skating	Birthday Party			Family Reunion			
Figure Skating	Anniversary Party			Picnic			
Hockey - Non-contact	Family Dinner			Birthday Party			
Hockey – Contact		Shower		/	Shower		
Hockey - Power Skating		Reception /			Wedding		
Hockey – Skills Non-Confact		Funeral			Church Service		
Hockey – Skills Controlled Co Curling	Other (specify)			Community Event X			
Other (specify)				Other (specify)			
	Business:						
Arena Floor	Maeting			POOLS			
Lacrosse (Non-Contact)	Seminar/Workshop			Recreational Swimming			
Broomball /	Worship/Service			Fitness Classes			
Ball Hockey	Trade Show			Other (specify)			
Other (specify)		Concert			GENERAL INFORMATION:		
<u>Ball Diamonds:</u>	Other (specify)			Fundraiser: YES NO			
Baseball				Non-profit Organization: (YES) NO			
Other (specify)				Ticket Sales: YES NO			
	Fitness			Vendors YES NO			
FOR TOURNAMENTS & LEAG	Dry Land Training			Amplified So	bund	YES NO	
# OF TEAMS:	Fitness Classes			NOTES:			
	<u> </u>	Other (specify)			NO(LO.		
				·		<u></u>	

#### **RENTAL TERMS AND CONDITIONS**

- All visitors to Haldimand County's recreational facilities are expected to adhere to the Public Conduct on Haldimand Count Property Policy and behave or act in a manner that respects the rights of others so that they may use and enjoy our facilities. The policy can be viewed on-line or is available on request.
- The Renter is responsible for reading and adhering to all aspects of the County's Facility Booking and Ice Allocation Policy, which
  can be viewed on-line or is available on request.
- Alcohol is strictly prohibited on County property unless permission has been granted. Permission for alcohol will only be granted if the following has been received from the Renter and it is deemed acceptable to the County:
  - Special Occasions Permit
  - Smart Serve certificates for all servers
  - A valid Certificate of Insurance confirming the required coverages, including liquor liability, from the renter's overriding body or through the Facility User Insurance Program (hereafter referred to as FUIP (described in detail below).
     Haldimand County reserves the right to prohibit alcohol sales, service or consumption on its property.
- Due to the high risk of injury associated with inflatables/air bounce devices, they are not permitted on County property with the
  exception of Council-approved Special Events.
- The Renter is responsible for picking up a key, where applicable, for certain park facilities. Please check with the Booking Clerk at least one week prior to your event to make arrangements as required.
- The Renter shall be personally responsible for any costs resulting from damages caused by accidents, negligence or malicious
  damage to any part of the facility and/or equipment therein by any person or persons connected with the function. Charges to be
  invoiced include the actual cost of repairs/replacement plus administrative charges.
- Direct adult supervision of all participants under the age of 18 must be provided.
- Bookings on firm contracts cannot be cancelled, unless otherwise noted in the Facility Booking and Ice Allocation Policy.
- · Your contract may be amended at the discretion of Haldimand County for reasons including but not limited to:
  - o facility maintenance
  - Inclement weather
  - facility scheduling
- The Renter is not permitted to sub-rent the facility to any other person or organization.
- The Renter must ensure dressing rooms are vacated no more than 1/2 hour after leaving ice/floor surface or additional charges may apply.
- The Renter must ensure the premises are vacated within 1/2 hour of the end time shown on their rental contract for rentals or additional charges may apply.
- Renters are not permitted to offer any services or goods such as those offered by concession or pro shop operators that are
  presently contracted by Haldimand County. Any attempt by the renter to provide said services will be considered a breach of
  contract.
- The Renter shall inspect the facility at the commencement of the rental to ensure that it is in satisfactory condition for the purposes
  of the rental. Any issues shall be reported promptly to the Facilities and Parks Operation Attendant, where available, or to the
  Facility Booking Clerk. Where facilities are not staffed during the rental, please contact the Emergency Contact Number on this
  Contract to report an issue.

#### The Renter hereby acknowledges the following:

Liability insurance is mandatory to be carried by the renter of the herein mentioned facility(les). The insurance requirements are as follows:

\* \$2 million general liability insurance on an occurrence basis containing cross liability/severability of interest clauses, with coverage for

- bodily injury and/or property damage
- \* Haldimand County named as an additional insured
- \* 30 days notice of cancellation

If the Renter is a member of an overriding body (ie. Parent Association, Church Group, Business Affiliate) that carries liability insurance which meets the requirements for this rental (listed above), the Renter will provide Haldimand County with a Certificate of Insurance in a form satisfactory to Haldimand County a minimum of 14 days prior to the booking.

If the Renter is not a member of an overriding body, the Renter will purchase the required insurance through the County's Facility User Insurance Program (FUIP) to be added to the contract cost.

The Facility User Insurance Program is subject to a \$500 deductible and in the event of a claim, the Renter will be responsible for the payment of the deductible under the FUIP.

The Renter indemnifies and holds harmless Haldimand County, it's elected officials, employees, servants, agents, successors and assigns from and against any arid all claims, causes of action, demands, losses, costs, charges, fees, expenses, including legal fees, or other proceedings of every kind or nature whatsoever brought against, suffered by or imposed on Haldimand County arising from the rental and use of said facility(ies).

With the exception of seasonal sport contracts, signing and returning this application will be confirmation of the booking and it can only be cancelled under exceptional circumstances, as per the Facility Booking & Ice Allocation Policy.

I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS OF THE RENTAL.

**Renter's Signature** 

115/2018

