

Rental Application Packet Black Diamond Community Gym

City of Black Diamond 24301 Roberts Drive PO Box 599 Black Diamond, WA 98010 Phone: 360-851-4500

Fax: 360-851-4501

www.blackdiamondwa.gov

Dear Rental Applicant:

Welcome to Black Diamond! Enclosed is the City of Black Diamond Rental Application for the Black Diamond Community Gym. Please complete the application form, sign and date. We cannot process an application without a date and applicant signature. The Black Diamond Community Gym is a great location for all types of events including birthday parties and team practices.

Submit the application to: City of Black Diamond, Attn: Rental Coordinator, PO Box 599, Black Diamond, WA 98010.

After initial review of the application, you will be notified of preliminary acceptance and provided with what fees may be applicable.

Please allow 10-15 business days for the complete processing of your application. You will need to sign and return a copy of the Rental Agreement contract after your application has been approved.

Please note: If you are applying for a sports team to use the Gym for team practice or competition, you must also complete and return the enclosed City of Black Diamond Youth Sports Head Injury Policy (Appendix A), as well as a signed Waiver of Liability for each participant on the team. These documents must be submitted at the time you return the signed copy of the Rental Agreement and required certificate of insurance.

Sincerely,

City of Black Diamond

Enclosures:

General Rental Information Rental Reservation Request Form Rental Checklist (for staff use only) Youth Sport Head Injury Policy (Appendix A) Gym Rental Agreement Waiver of Liability – Adult Users Waiver of Liability – Minor Users

General Rental Information for the Black Diamond Community Gym

RESERVATION PROCEDURES:

Rental reservations are accepted Monday through Friday, 9 a.m. to 5 p.m. by calling (360) 469-9435. You may call to confirm availability; however, Rental Agreement contracts must be completed in person. Rental reservations are secured once a Rental Agreement contract has been completed and approved and the full deposit fees (if needed) are paid. For a one-time event, rental fees are due two weeks prior to the date of the event. For a recurring reservation (such as a weekly team practice), rental payments are due two weeks before the first day of the recurring event, and monthly thereafter. Failure to pay the rental fees when due could result in cancellation of the reservation. Please see our cancellation policy below. Reservations are accepted on a first-come, first-served basis and can be scheduled up to one year in advance of the rental date. Please see the RENTAL AND DEPOSIT FEES for a current fee schedule.

DAMAGE DEPOSIT:

Damage deposits are refundable as long as the facility (or rented room) is clean after your event and no damage occurs. Failure to meet these conditions will result in forfeiture of your deposit and may also include the applicant being responsible for additional charges and forfeiture of future reservation privileges. Please allow 3 -4 weeks for deposit refund.

EQUIPMENT:

The City provides a limited amount of equipment for use during rental events. Rental groups should consult with the Rental Coordinator prior to booking their event for a list of available equipment. Rental groups may elect to bring in additional equipment for their event. Rental equipment is subject to approval by the City. Rental equipment must be dropped off and picked up during your scheduled rental times. Rental Coordinator cannot sign for rental equipment.

ALCOHOL:

No alcohol is allowed on the premises at any time.

ACCESS:

Staff will provide access to the rented areas at the start time of the Rental Agreement contract. Rental groups will not be allowed access to the room prior to the start time designated on the Rental Agreement contract. Rental groups are responsible for setting up for their own event and returning all equipment to the assigned storage areas.

DECORATIONS:

Only freestanding decorations are permitted. Items may not be affixed to the ceiling, doors, columns, walls, light fixtures or windows. Damage resulting from the use of tape or other adhesives will result in the loss of all or a portion of your damage deposit. The following are prohibited: fog and smoke machines, rice, birdseed, confetti, glitter, dance wax.

GENERAL GUIDELINES:

Delivery of items for a rental event must occur during the scheduled rental time. The Rental Coordinator will not sign for delivery items and early deliveries will not be accepted. All items not belonging to the City must be removed at the conclusion of the rental event. Rental groups are not

allowed to store any items at any facility under any circumstances. Fireworks are not permitted on the grounds or in any facility. Smoking is prohibited on all grounds and in all facilities.

CLEANING THE FACILITY:

Rental groups are responsible for cleaning the facility, including hallways and bathrooms, at the conclusion of the event (or at the end of each day of use for a recurring reservation). Please refer to the RENTAL CLEAN-UP CHECKLIST for a detailed list of renter responsibilities. The Rental Coordinator is available to conduct a pre-event inspection prior to the start of your rental to ensure cleanliness of the facility. Request this service during your check-in on the day of your event. Limited cleaning equipment will be made available to user groups. To ensure the return of the damage deposit, please ask the Rental Coordinator to complete a post-event inspection at the conclusion of the rental. Any cleaning and/or repairs that require staff time and materials will be deducted from the damage deposit and/or charged to the rental group. If a rental exceeds the time reserved, the rental group will be charged for the additional time and/or it may be deducted from the damage deposit. Failure to follow the Cleanup Checklist may result in forfeiture of the damage deposit and additional charges and could also result in denial of future rental usage.

CANCELLATION POLICY:

Rental cancellations will result in a non-refundable cancellation fee of fifteen dollars (\$15.00) regardless of the amount of notice given. **Cancellations made with less than 24 hour notice will not be refunded.** Appeals regarding the application of a cancellation fee shall be directed to the City's Public Works Department. All facility rental date and time change requests are subject to availability. Additional rental time must be paid for at the time the request is received. No refund will be issued for a reduction in rental hours if the request is received with less than two (2) weeks' notice.

ON-GOING RENTALS:

Long-term and on-going rental require approval by the Rental Coordinator. In most cases requests for an on-going rental will be approved for no more than six (6) months at a time, unless authorized by a contract. Rental fees will be due and payable two weeks prior to the beginning of each month during the rental period.

QUESTIONS:

For questions, please call the Rental Coordinator Brock Deady at (360) 469-9435.

The City reserves the right to refuse rental of the gym due to availability, incompatibility of the rental request with city purposes, or for any other reason.

NON-PROFITS:

Non-Profit groups contact (360) 469-9435 for rental rates and policies applicable to 501c(3) organizations as defined by the Internal Revenue Service. The APPLICATION FOR A WAIVER/REDUCTION OF RENTAL FEES must be completed and approved by the City for non-profit rental rates to apply.

RENTAL CLEAN-UP AND DAMAGE CHECKLIST:

RENTAL GROUP RESPONSIBILITY – You are responsible for the cleanliness and potential damage to the room and equipment that you rent according to the checklist below. Please use this checklist as a guideline to help you clean up the area. If you have any questions please ask the Rental Coordinator. The Gym must be presentable for the next rental group without additional staff help (including custodial help).

| GYMNASIUM: |
|---|
| \square Remove all decorations and personal items. |
| ☐Wipe all counters, tables and chairs. |
| \square Sweep floor and dispose waste into garbage. |
| \square Put chairs, table and equipment away in proper storage areas. |
| ☐ Mop all spills. |
| \square Remove streak marks left on floors. |
| \square ASK RENTAL COORDINATOR TO CONDUCT A POST-EVENT INSPECTION. |
| HALLWAYS, RESTOOM, ETC.: |
| ☐ Pick up all garbage. Remove personal items. |
| RENTAL COORDINATOR WILL BE RESPONSIBLE FOR: |
| \square Conduct pre-event room inspection for cleanliness and damage. |
| \square Advise groups of equipment available. |
| \square Inform groups of miscellaneous information. |
| \square Provide clean-up materials for groups. |
| ☐ Conduct post-event room inspection for cleanliness and damage. |

You must be cleaned up and out of the facility by the ending time of your rental agreement. You will be charged for any additional time pro-rated to the quarter hour at a rate that is double the normal rental rate.

DAMAGE AND CLEANING DEPOSIT:

The damage and cleaning deposit will be returned within thirty days as long as the terms of the Rental Agreement contract are met.

RENTAL RATES:

| Black Diamond Community Gym | Mon-Sun |
|---|------------------|
| Local 501c(3) non-profits receive 25% off of the listed regular rental rates Must complete a non-profit use form and be approved by the City | (1hr min) |
| Hourly Rental Rate | \$40.00 |
| Drop-in Fees (Volleyball, Basketball) 18 and older – 17 and under free | \$3.00 |
| Jazzercise | Per Agreement |

| For City Use Only – Internal Review and Approval | | | | |
|--|-------|-------|-------|--|
| Approval: | Date: | Fees: | Paid: | |



Black Diamond Community Gym Rental Reservation Request

Phone: (360) 851-4500 | Fax: (360) 851-4501 PO Box 599, Black Diamond, WA 98010

| Requested Date: | _ | Facility: Gym | |
|---|---------------------------------------|---------------------------------|-----|
| Requested Time*am/pm | toam/pm | Estimated Attenda | nce |
| Guest Arrival Timeam/pm | & Guest Departure Time _ | am/pm | |
| *Rental request time includes all set up an | nd clean-up time | | |
| Type of Event | | | |
| Primary Contact Name | | | |
| Organization's Name | | | |
| Primary Phone | Alternate Phone_ | | |
| Email Address | Fax Number | | |
| Address | | | |
| City | State | Zip | |
| To assist us in serving you be | etter, please tell us which of the fo | ollowing will be at your event. | |
| Event Plans | Y | YES N | О |
| Advertised or Open to the Public | | |] |
| Athletic Activity | | |] |
| Amplified Sound | | |] |
| Event Participant Fees | | |] |

| Sales (food, t-shirts, etc.) | | |
|--|---|-----------------------------|
| Catering | | |
| Serving Food | | |
| Please initial each of the following items to a agree to the item. | acknowledge that you have read | I the information and |
| I understand that this document server and in no way serves as an agreement for rental a must be completed and confirmed by the City of the Rental Agreement contract for confirmation | and/or usage. I understand that a f Black Diamond and all deposits | Rental Agreement contract |
| I understand that my requested rental sunderstand that I will not have access to the faci end-time. | | |
| I understand that I am required to do a | all of the set-up and clean-up durin | ng my event. |
| I understand that I have received a cop do all the clean-up to ensure that I receive my da | | p form and I am required to |
| I understand that if I go over my sched my damage deposit and will be double the normal | | ne will be deducted out of |
| I understand that I am required to obta Rental Agreement contract. | ain at my cost insurance that meets | the requirements of the |
| I understand that full payment of all reconfirmed date of usage. I understand that if the respective due dates it will result in the cancellation contract. | e required certificate of insurance is | s not received by the |
| You will be contacted by our Facility Co Rental Request form. | pordinator within five (5) business | days of submission of the |
| This application must be submitted at le | east 30 days before the event | |
| ➤ Please do not include any forms of payr | ment at this time. | |
| Rental Applicant | | |
| Date | _ | |

RENTAL CHECKLIST – For Staff Use Only

| | | City Check off | N/A | |
|----|---|-------------------|-----|--|
| • | Rental Request | | | |
| • | Non Profit Use Application o Proof of 501c(3) | | | |
| • | Rental Agreement | | | |
| • | Payment of Deposit | | | |
| • | Rental Fees Paid | | | |
| • | Proof of Insurance Certificate w/Certificate Naming City of Black Diamond as Additional Insured | | | |
| Re | ntal Coordinator Signature: | Date | e: | |

Appendix A

City of Black Diamond Youth Sports Head Injury Policy

All youth sports groups utilizing City of Black Diamond facilities are required to provide a "statement of compliance" (below) with the policies for the management of concussion and head injury. This statement of compliance shall be returned to the Rental Coordinator prior to the group's first use of the City of Black Diamond facility(s).

| and head injury. This statement of compliance shall be returned to the Rental Coordinator prior to the group's first use of the City of Black Diamond facility(s). |
|--|
| (Organization Name) requests the use of the Black Diamond Community Gym facility for the following dates: |
| (Organization Name), a private youth sports group, verifies all coaches, athletes and their parents/guardians have complied with mandated policies for the management of concussions and head injuries. These policies at a minimum shall include: Annually require all athletes and the parent(s)/guardian(s) of those athletes to sign and return an information sheet relating to the nature and risk of concussion or head injury. This information sheet shall include the signs and symptoms of concussion/brain injury. Ensure that any athlete showing signs or symptoms of concussion/brain injury is removed from participation immediately, and not allowed to return to play until they have written clearance from a licensed health care provider trained in the evaluation and management of concussion/brain injury. |
| Ensure that all coaches (paid or volunteer) are educated in the nature and risk of concussion or head injury prior to the first practice/competition. This education shall include signs and symptoms of concussion/brain injury. |
| Attached is a proof of insurance under an accident and liability policy issued by an insurance company authorized to do business in Washington State covering any injury or damage with at least \$1,000,000 due to bodily injury or death to one person and at least \$2,000,000 due to bodily injury or death to two or more persons. |
| Signed: Representative of Youth Sports Group |
| Print name: |

*Note: Access to City of Black Diamond facilities may not be granted until all requirements of this application are complete and approved by the City of Black Diamond.

Date: ____

(attach to any rental request form involving youth sports)