



City of Clay Facilities Rental Agreement:

CITY FACILITIES FOR RENT TO CLAY RESIDENTS OR CLAY BASED ENTITIES ONLY

Fax or email application: 205-681-6266 or pgilham@clayalabama.org

Name: _____

Address: _____

Phone: _____ Email: _____

Alternative Contact Name & Number: _____

Date(s) and Time(s) of Rental: _____

Number of people to attend: _____ Type of Function: _____

Facility to be rented:

X	Facility	Rental Fee		Deposit
	Community Center (4 hours)	\$500.00	\$125.00 per additional hour	\$250.00
	Cosby Lake House (4 hours)	\$450.00	\$110.00 per additional hour	\$200.00
	Library Meeting Room (4 hours)	\$400.00	\$100.00 per additional hour	\$150.00
	Cosby Lake Pavilion (2 hours)	\$50.00	\$25.00 per additional hour	\$50.00
	Playground Pavilion (2 hours)	\$50.00	\$25.00 per additional hour	\$50.00
	Splash Pad Picnic Table (2 hours)	\$50.00	\$25.00 per additional hour	\$50.00
	Splash Pad Umbrella Table (2 hours)	\$50.00	\$25.00 per additional hour	\$50.00
	Tennis/Pickleball Center (4 hours)	\$500.00	\$125.00 per additional hour	\$250.00
	Disc Golf Course (4 hours)	\$500.00	\$125.00 per additional hour	\$250.00
	Football Field	\$75.00/2 hours no lights	\$100.00/ 2 hours with lights	\$50.00
	Ballpark Field – practice (2 hours)	\$75.00/2 hour no lights	\$100.00/2 hour with lights	\$50.00
	Ballpark – Tournament (all day)	\$1,000.00/field	\$1,000.00/field	\$150.00

Water Access Needed for Inflatables

A copy of your driver’s license and/or utility bill may be required for address verification.
Special rates may be negotiated at the City Manager’s discretion.

For Office Use Only:

Date Received: _____ Date Paid: _____

Rental Fee: _____ Deputy/EMS Fee: _____

Water Fee: _____ Deputy Contacted

Total Fee: _____ Date: _____ By: _____

Notes: _____

1. City of Clay facilities are available for rent to Clay residents and/or groups headquartered in Clay only.
2. Parties of 30 or more are required to hire a Jefferson County Sheriff's Deputy and/or EMS personnel. The cost of a deputy shall be \$35.00 per person per hour (in addition to rental fees) to be paid by the renter to the City of Clay. The City Manager's office will assign and reserve all deputies.
3. An application and all fees paid via credit card will be due immediately at the time of reservation.
4. Rental fees will be refunded only if the renter makes the cancellation and return the rental fee request in writing at least fourteen (14) calendar days before the scheduled event.
5. City of Clay facilities will be available for rental any time it is not being used for city business. The hours available for rental are as follows:

Facility	Open	Close
Community Center (4 hours)	8:00 am	9:00 pm (10:00 pm on Fri & Sat)
Cosby Lake House (4 hours)	8:00 am	Dusk
Library Meeting Room (4 hours)	During library hours	During library hours
Cosby Lake Pavilion (2 hours)	8:00 am	Dusk
Playground Pavilion (2 hours)	8:00 am	Dusk
Splash Pad Picnic Table (2 hours)	During operating hours	During operating hours
Splash Pad Umbrella Table (2 hours)	During operating hours	During operating hours
Tennis/Pickleball Center	8:00 am	midnight
Disc Golf Course	8:00 am	Dusk
Football Field	8:00 am	10:00 pm
Ballpark	8:00 am	10:00 pm

6. If water for an inflatable is required, an additional \$50.00 per hour will be charged.
7. City of Clay facilities will be closed on the following days: New Year's Day, MLK Jr Day, Presidents Day, Good Friday, Easter Sunday, Memorial Day, Fourth of July, Labor Day, Veterans' Day, Thanksgiving Day (and the following Friday), Christmas Eve, Christmas Day, and New Year's Eve.
Requests for times other than regular rental hours must be submitted to the City Manager's office for approval. Approval of requests is not guaranteed. In cases where requested use causes the City to furnish personnel on an overtime basis, the rental rates will be adjusted accordingly.
8. The City Manager's office, at the time a fee-based rental is requested, may reserve and confirm any reservation provided the room and time requested is available and the appropriate fee is collected.
9. Seating is as follows. Any additional seating needed shall be furnished by the renter

Facility	
Community Center (4 hours)	8 round tables, 4 rectangle tables, and 80 chairs
Cosby Lake House (4 hours)	5 rectangle tables and 40 chairs
Cosby Lake Pavilion (4 hours)	No tables or chairs
Playground Pavilion (4 hours)	No tables or chairs
Splash Pad Picnic Table (2 hours)	Seats 8 people
Splash Pad Umbrella Table (2 hours)	Seats 4 people
Library Meeting Room (3 hours)	10 tables and 60 chairs

10. The renter of record is responsible for any damages that occur while the facilities are entrusted to their care and for the general clean-up. The City Manager's office, at its discretion may charge the provided credit card for damages incurred over the duration of the rental. The renter upon inspection may be refunded the damage deposit within three (3) business days provided there are no damages to the property.

Renter Initial: _____ Date: _____

11. No alcoholic beverages, drugs, and/or fireworks are allowed on the premise at any time. Discovery of such will result in immediate evacuation of rented city facilities and security deposit forfeiture.
12. It is understood that persons or groups using any city facilities will abide by the laws and Ordinances of the City of Clay.
13. Nothing will be attached or hung from the ceiling, support beams, or walls in any of the facilities.
14. Horseplay and inappropriate behavior and conduct are not tolerated at city facilities. Sitting and standing on tables and/or countertops are not tolerated.
15. City facilities will be completely clean upon completion of the function. This includes sweeping floors, wiping down and cleaning all tables and countertops, removal of any decorations or signage, bagging and removal of all trash from the Facilities and grounds and placement in the trash bins on the property. *Failure to do so will result in forfeiture in any and all rental deposits.*

Renter Initial: _____ Date: _____

16. The City of Clay and its employees and/or agents will not be liable or responsible in any way whatsoever for any injury that may occur during the course of your function.
17. If your party does not adhere to the times indicated on the rental agreement, your deposit will be forfeited.

Renter Initial: _____ Date: _____

18. Thermostats are to be adjusted by City Personnel only.
19. Exceptions: The Mayor or City Manager only may grant exceptions to the above guidelines. Requests must be made in writing at least thirty (30) days in advance of the date of event.

I have read this agreement and I agree to abide by the terms and conditions found on this form. I also understand that I will be held responsible for any damages that occur to the Facilities during the course of my rental.

Signature of Renter

Date

Please call 205-680-1223 during business hours, or 205-420-1791 after hours if needed.



Card Number: _____ Exp.: ____/____ CVV Code: _____

Billing Address: _____

Cardholder Name: _____ Cardholder Signature: _____

Tennis/Pickleball, Disc Golf, Football Field, Ballpark Rental – Additional Information

In addition to previous rules and regulations, the following will also be in place for any tournaments, invitationals, competitions, meets, and other similar events.

1. Insurance showing the City of Clay as co-insured must be provided at least 48 hours in advance.
2. No outside food or drink allowed unless renter provides a copy of Jefferson County Health permit.
3. Parking and concessions will be collected by the City of Clay. Parking fees for tournaments are \$5.00 per car. Cars with players in uniform will be exempt from this fee. This may be negotiated as part of a large tournament.

In consideration of being allowed use of the above named facility, I hereby assume all responsibility for said group. I authorize the City of Clay to obtain necessary medical care and treatment for the participants for any illness or injury occurring during the rental period, but I understand the City of Clay is NOT assuming a duty to obtain medical treatment, make medical decisions, or render medical care or treatment to the participants. I understand that the City of Clay has no accident or medical payment insurance coverage for the participants and I agree to pay all reasonable medical costs incurred if treatment is obtained. I understand that the City of Clay assumes no responsibility of liability for lost, stolen, or misplaced items. I release the City of Clay and its agents, servants, and employees from all claims, actions, causes of action and rights of recovery or reimbursements of any type that any participant has or may have in the future which arise from or are related in any manner to the facility rental (including, but not limited to claims of all bodily injury and property damage or loss). This instrument is signed both individually and on behalf of the participants present at rental.

Signature

Date

I, _____, a representative of _____ have received and read a copy of the Clay's Rental Policy and agree to adhere to all requirements/restrictions therein. I understand that I will be held responsible for any damages that occur to the park during the course of my rental. Failure to comply may warrant immediate cancellation of the event and possible denial of future reservations.

Signature

Date

Cleaning Checklist:

City facilities will be completely clean upon completion of the function. This includes sweeping floors, wiping down and cleaning all tables and countertops, removal of any decorations or signage, bagging and removal of all trash from the Facilities and grounds and placement in the trash bins on the property. *Failure to do so will result in forfeiture in any and all rental deposits.*