



City of Sunny Isles Beach
Cultural & Human Services Department
 18115 North Bay Road, Sunny Isles Beach, FL 33160
Pelican Community Park Community Center
Facility Rental - Rules & Guidelines

(p) 305.792.1706
 (f) 305.792.1566
www.sibfl.net

Pelican Community Park has various rooms available for rent in the facility. The rooms are available for a minimum of 4 hours at a time, and must be reserved at least two (2) weeks in advance of event date. The rental provides you exclusive use of your designated location during the hours of your rental (with the exception of the playground).

Fees:

	Non-Profit /		For Profit	Each Addtl Hour
	Resident*	Non-Resident		
Multi-purpose Room (1st Floor)	\$400*	\$700	\$1,200	\$75
Arts & Crafts Room	\$300	\$550	\$900	\$25
Gym**	\$500	\$900	\$1,600	\$110
Playground***	\$200	\$400	N/A	\$20

*Promotional Offer FOR RESIDENTS ONLY	One side of Multi-purpose room (1st Floor)	\$200	*One Side of Multi-purpose room (Screen side or Kitchen side, based on availability). Must apply within 30 days of event date (no earlier than 30 days prior to event). Priority is given to applications for rental of the whole Multi-purpose Room.
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** Additional Fees - If you are renting the gymnasium, food cannot be served at your event. Depending on the type of event, there may be an additional charge in order for park staff to install, clean, and remove the floor covering for your event. Charges for the floor covering are as follows: \$400 for a 4-hour event, \$50/hr each additional hour.

*** When renting the playground area for your event, the picnic tables next to the playground area will be reserved. The playground itself, though, will still be open to the public.

Audio/Visual Devices -

available for rent for additional \$50:

- Podium & Sound System or Wireless mic
- Projector, DVD Player & Screen

Cleaning Security Deposit:

There is a cleaning security deposit required for each event. This deposit of \$150 will be returned to the renter after the event is completed, IF AND ONLY IF the facility is returned clean. The renter is responsible for cleaning up after the activity.

Insurance:

If you are going to have entertainment or catering at your party, the vendors need to have an insurance policy and worker's compensation.

Criteria

* One million dollar liability insurance certificate must state the following: "City of Sunny Isles Beach" as an additional insured.

* Vendors must have Worker's compensation. If they do not, they must provide a letter on company letterhead stating that they are not required because they have less than three (3) employees. Letter must also specify date, time and location of party / event. No rental will be permitted without proper insurance.

* Insurance certificate must be faxed to 305.792.1566 at least two weeks prior to party / event. Parties / events will not take place without approved insurance. It is the responsibility of the renter and vendor to verify that the insurance has been approved.

* Clowns, magicians and food vendors that are bringing prepared foods are not required to submit insurance.

General Rules:

All fees must be paid at least two (2) weeks prior to party/event.

Set up and clean up time are included in rental time. These include set up and breakdown of ALL vendors.

Party decorations may not be stapled or taped to walls or ceiling of community center.

All food must be precooked.

No drinking or selling of alcoholic beverages permitted.

It is the responsibility of the renter to supervise all guests, gifts, and supplies.

No animals permitted.

Payment:

Full payment of fees must be made at least two (2) weeks prior to event date. Payment can be made with check, cash or credit card (Mastercard or Visa). Checks should be made payable to "City of Sunny Isles Beach". If paying by check, please provide two checks, one to cover facility rental, and the other to cover cleaning deposit.

Cancellation Policy:

Cancellation of party 48 hours prior to event can receive refund minus \$25. No refunds thereafter.



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Cultural & Human Services Department
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 Pelican Community Park Community Center
Facility Use Agreement

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This Permit Entitles _____
Person or Organization

Address _____
Street, City, State, Zip Code

Phone Numbers _____
Home: Business: Other:

Use of the _____
Specific area being used

from _____ to _____
start time end time

on _____ thru _____
day date day date

for the purpose of _____
type of activity (profit/non-profit)

Deliveries and set up will begin at _____ on _____
time day date

Removal of all equipment, structures and rubbish will be completed by: _____
date/time

Estimated attendance _____

Fees and Charges:

	\$	Date received	Receipt #
Facility Rental Fee	_____	_____	_____
Audio/visual Devices Fee	_____	_____	_____
Add'l Service fees	_____	_____	_____
TOTAL VALUE	_____	_____	_____

Cleaning Security Deposit **\$150** Date Received _____

I have read and agree to the terms and conditions indicated on the reverse side.

 Applicant Signature:

 Date

 PCP Approval:

 Date

 Department Director

 Date

CITY OF SUNNY ISLES BEACH
PARKS AND RECREATION DEPARTMENT

INDEMNITY AGREEMENT

IN CONSIDERATION of the permission granted by the CITY OF SUNNY ISLES BEACH for the undersigned to use **THE PELICAN COMMUNITY PARK RECREATION CENTER**, ON THE DATE(S) OF _____ during the time beginning _____ am/pm, and ending _____ pm, with approximately _____ persons in attendance, for the purpose of a _____, the undersigned does hereby agree to indemnify and save harmless the CITY OF SUNNY ISLES BEACH for any damages incurred by the CITY OF SUNNY ISLES BEACH resulting directly or indirectly from use by the undersigned of facilities of the CITY.

This indemnification shall include not only physical damage to the property of the CITY (including cleaning the facility) but also, any claims by third persons for the injuries or property damage resulting from such use due to negligence or intentional acts of the undersigned, its agents, its employees, invitees, heirs, administrators or assigns.

IN WITNESS WHEREOF, the undersigned has set his hand and seal on this _____ day of _____, 20____.

WITNESS:

YOUR SIGNATURE