



Office Use Only	
Staff Initial _____	Date _____
50% Deposit Collected _____	
Proof of Residency Verified _____	

Facility Usage Agreement Recreation & Community Centers

Instruction – Facility rules, usage information and completion of this form are stated on the back

Date Submitted: _____

User Name or Organization: _____ Resident/Member Non-Resident
 Profit Non-Profit

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Contact Person: _____ Contact Phone Number: _____

NOTE:

- For extended periods of use or very involved facility usage, attach a written request with as much detail as possible with this application
- Arrival and Departure Times must include all anticipated setup and cleanup time required
- If over 1,000 people, FUA must be reviewed and signed off by Risk Management

TCRC Facility Operational Hours
M-F 8:00AM – 8:00PM
Sat 8:00AM – 6:00PM
Sun 1:00PM – 6:00PM

Date(s) Requested: _____	Activity Planned: _____
Number of Participants: _____	
Arrival Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM	Departure Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM

Describe details of the Meeting/Function: (i.e. fund-raising event, ticket required event, non-profit, for profit, tournament, party, etc.)

Facility Needed:

- G.W. Henderson, Sr. Recreation Center
- White Oak Community Center
- Dundee Community Center
- Robinsonville Community Center

I fully understand that this application does not confirm any request until it has been signed, dated, reviewed and approved by an authorized Center Coordinator and the Recreation Director, at which time a copy will be given to me or my representative, or mailed to the address designated above.

If applicable, I understand that I will be informed prior to my event of any requirement for fees to be charged and collected for staff overtime. I also acknowledge that I have received a copy and have read, understand and agree to all items and terms as outlined in the Facility Usage Agreement, including how to proceed in the event of any problems or emergencies that need immediate attention during my event. I further affirm that I have completed this application with as much accuracy and details as possible.

A (50%) non-refundable deposit on Meeting Rooms, Kitchen and itemized provisions are to be paid at the time of application request before facility is scheduled.

Gymnasium non-refundable deposit amounts (listed on the back of this sheet) are to be paid at the time of application request before facility is scheduled.

The remaining balance is paid no later than (14) days before the event to confirm availability.

Applicant agrees to hold Tunica Parks & Recreation, Tunica County, its agents and employees harmless for any and all acts and/or omissions, and accepts sole responsibility for usage of the facilities.

(Signature of Applicant required on back of this sheet)

Area Requested:	
(Prices are located on the back of this sheet)	
<input type="checkbox"/> () Meeting Room(s)	\$ _____
<input type="checkbox"/> Entire Meeting Room	\$ _____
<input type="checkbox"/> Kitchen	\$ _____
<input type="checkbox"/> (1/2) Day Gymnasium (4-6 Hours)	\$ _____
<input type="checkbox"/> Full Day Gymnasium (6-12 Hours)	\$ _____
<input type="checkbox"/> (2) Days Gymnasium (12-24 Hours)	\$ _____
<input type="checkbox"/> (3) Days Gymnasium (24-36 Hours)	\$ _____
<input type="checkbox"/> Pavilion	\$ _____
<input type="checkbox"/> Security (Agent) (Due to Participant Capacity)	\$ _____
(Each itemized provision will be available at a cost of \$25 per day for non-member/profit organizations)	
<input type="checkbox"/> PA System/Radio	\$ _____
<input type="checkbox"/> Podium	\$ _____
<input type="checkbox"/> TV/Monitor	\$ _____
<input type="checkbox"/> Overhead Projector	\$ _____
<input type="checkbox"/> Power Point Projector	\$ _____
Total Amount	\$ _____

Deposit (Collecting Non-Refundable 50% of Total Requested Services for Meeting Rooms, Kitchen and itemized provisions) (Note: Special Non-Refundable Deposit rates for Gymnasium Rental on back of this sheet)	
<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check	Total Amount Collected \$ _____

Tunica Parks & Recreation

G. W. Henderson, Sr. Recreation Center

1165 Abbay Drive • Tunica, Mississippi 38676
Office 662-357-0523 • FAX 662-363-2242

Dundee Community Center

9140 Dundee Road • Dundee, Mississippi 38626
Office 662-363-1415 • FAX 662-363-1260

White Oak Community Center

1100 White Oak Road • Tunica, Mississippi 38676
Office 662-357-1463 • FAX 662-357-1467

Robinsonville Community Center

5274 Kirby Road Suite A • Robinsonville, Mississippi 38664
Office 662-373-1700 • FAX 662-373-1701

Applications are not valid until authorized by the Parks & Recreation Director and are subject to the general policies and rules.

TCRC General Policies

The following policies, rules, regulations priorities and charges have been established to provide consistent guidelines to assure safe operation and provide enjoyable recreation to all pass-holders and guests while using the facilities. Each guest is responsible for knowledge of these policies and failure to observe them may be caused for suspension or termination of all usage privileges associated with these facilities. Policies may be changed for the best interest of facility operation.

The rental for the Centers by groups of individuals within the limits of Tunica County will be permitted under the following conditions:

Rental Charges & Deposit

Meeting Room Rates (Rates quoted are for a four-hour block of time). Additional blocks of time are available at \$25 per hour for (Entire Room Meetings) and \$15 per hour for (1/2 Room Meetings and Kitchen Usage).

Name of Meeting Room	G. W. Henderson, Sr. Recreation Center		White Oak Community Center		Dundee Community Center		Robinsonville Community Center	
	Resident	Non-Res.	Resident	Non-Res.	Resident	Non-Res.	Resident	Non-Res.
Meeting Room (s)	\$ 50.00	\$ 75.00					\$ 50.00	\$ 75.00
(Entire) Meeting Room	\$ 150.00	\$ 225.00	\$ 75.00	\$ 100.00	\$ 50.00	\$ 75.00	\$ 150.00	\$ 225.00
Kitchen Use	\$ 50.00	\$ 75.00	\$ 50.00	\$ 75.00	\$ 50.00	\$ 75.00	\$ 50.00	\$ 75.00

Gymnasium Rates (For organizations and groups that are approved by the Recreation Commission)

TCRC Facility Operational Hours	Time Allotment		Rental Rate	Required Deposit Amount	Resident/Member	Non-Resident/Profit
	(1/2) Day ♦ (4-6 Hours)	Full Day ♦ (6-12 Hours)			\$	\$
M-F 8:00AM – 8:00PM			\$ 300.00	➔	\$ 100.00	\$ 150.00
Sat 8:00AM – 6:00PM			\$ 600.00		\$ 200.00	\$ 300.00
Sun 1:00PM – 6:00PM	(2) Days ♦ (12-24 Hours)		\$ 900.00		\$ 300.00	\$ 450.00
	(3) Days ♦ (24-36 Hours)		\$ 1200.00		\$ 400.00	\$ 600.00

- A (50%) non-refundable deposit is required to secure rental of meeting rooms, kitchen facility and services (Note: Special Non-Refundable Deposit rates for Gymnasium Rental)
- Applicants are required to pay the balance of the rental fee (14) days prior to the start of the rental
- Completed Contracts & Payments may be taken to the Facility requested between the hours of 8:00 a.m. - 5:00 p.m. Monday - Friday
All checks must be made payable to the Tunica County Recreation Commission
- Applicant must provide final head count of participants no later than (7) days prior to rental
- Deposits are required for applicable parties and are only refundable if the facility is closed due to inclement weather or due to extenuating circumstances
- The renting organization is responsible for actual cost of damage that occurs to the facility within time rented

Security

- All reservations of the capacity of (50) or more people will result in security being provided by the Tunica County Sheriff Department or a security agency. Charges for these services will be added to the total cost for services.

Access

- Deposit Fee payment must accompany Reservation Contract (Reservations will not be taken over the phone)
- Building keys will not be issued
- Entrance to and from the building will be from the main entrance

Reservations

- Reservations will not be taken by phone
- Requests for Facility Use will be accepted and confirmed (residents and non-residents) a maximum of (3) months in advance
- Contract must be completed after approval from the Tunica Parks & Recreation and the deposit fees must be paid for at the time of scheduling
- **Failure to confirm with (14) day advance payment automatically cancels reservations**
- The Commission reserves the right to cancel rental within a (30) day notice – Deposit will be refunded

Policy/Procedures

- Profit ventures, except for community services activities (Under auspice of the Commission), are prohibited
- The user(s) of the Center is (are) charged with complete responsibility for the care and protection of the Center and its contents, including furniture, fixtures, and facilities inside and outside the areas. If the building or properties appear damaged, a report must be immediately submitted to the Parks and Recreation Director during working hours or the Tunica County Sheriff's Department after hours
- A complete cleanup of the building is required after use. Failure to do so will result in possible refusal of future rental privileges
- The sale of any alcoholic beverage is strictly prohibited. Use of alcoholic beverages is strictly prohibited
- The possession or use of drugs or narcotics (of any kind) are strictly prohibited
- Firearms or weapons are strictly prohibited
- Building use by minors must be chaperoned by responsible adults
- Failure to comply with the above regulation may result in loss of future use of the Center
- Administration interpretation of this policy is the responsibility of the coordinator and/or Parks and Recreation Director, with appeal right to the Tunica County Recreation Commission for any aggrieved individual or group

General Information

- The ASSOCIATION will be granted use of said facility for this period of time and will be responsible for reporting any unsatisfactory use or conditions, which affect the ASSOCIATION and the COMMISSION. The ASSOCIATION agrees that the not for profit activities will take place, no religious or political activities will occur, or any alcoholic beverages whatsoever will not be allowed on the property. The ASSOCIATION agrees that failure to abide by any of the rules set forth in the agreement may result in forfeiture of the agreement and or criminal prosecution.
- The ASSOCIATION agrees to conduct their activities in strict and complete compliance with Policy Letter No. 1 which shall be deemed, a part of hereof as, fully and completely as if set out and copied verbatim herein.
- The ASSOCIATION agrees to provide the Tunica County Recreation Commission with the information required in stated Policy and any other materials deemed necessary by the Director of Parks and Recreation, at least ninety (90) days prior to registration.
- I/We have read and understand the policies and regulations as stated in the Policy and agree to abide by them. I/We understand that failure to abide by these policies and regulations may be cause for the revocation of the agreement for facility use.
- I/We further waive any claim against the COMMISSION and assume all risks and hazards incidental to the use of the facilities of the conduct of the activities and transportation to and from the activities. I/We further hereby release, absolve, indemnify, and hold harmless the TUNICA COUNTY RECREATION COMMISSION, TUNICA COUNTY, THEIR OFFICIALS, STAFF, AND/OR ALL OF THEM from and against any loss, liability, claims, causes of action, and expenses, including attorney's fees and damages, arising out of or related to the facilities, the conditions of the facilities, the activities, or the programs contemplated by their agreement.
- The ASSOCIATION shall maintain at all times during the term of this agreement, at its sole expense and at no expense to the COMMISSION, adequate and proper public liability insurance for the joint and separate protection of the ASSOCIATION and the COMMISSION, in amounts as designated by the COMMISSION, in case of injury to any one person, and in case of injury to more than one person in the same occurrence, and in case of property damage.

(This application is not valid until authorized by the TCRC Director and is subject to TCRC general policies and rules).

Applicant's Signature: _____ Date: _____
Center Coordinator's Signature: _____ Date: _____
Director's Signature: _____ Date: _____