

**TOWN OF PARMA V.F.W. POST 6105
550 PECK ROAD, HILTON, NY 14468
LODGE UTILIZATION AGREEMENT**

Contact Information (Please Print)

VFW Member: Active _____ Inactive _____

Renter Name _____ Contact Phone # (_____) _____ - _____

Address _____ City _____ State _____ Zip _____

Email Address _____

Organization/Alternate Name & Number _____

Rental Information	Date _____	Start Time _____ a.m. / p.m.	
		End Time _____ a.m. / p.m.	

Type of Activity/Event _____

Anticipated Attendance _____ (Group size limited to 99) Will alcohol be served? **Yes** _____ **No** _____ (If yes, complete the no fee alcohol permit on back-side)

Will food be prepared by someone other than the renter? **Yes** _____ or **No** _____

If **Yes**: Caterer Name _____ and a copy of their Monroe County Health Dept. Permit must be provided 30 days prior to the event.

Special Circumstances: (DJ, equipment, grills, bounce house, tents, chairs, tables, etc.*) _____

Any Professional Services Must Provide Proof of Insurance

Rental fees will be levied according to the fee schedule. All fees will be due at the time of application. Cancellations must be made thirty (30) days prior to the scheduled event to receive a refund. **There will be a \$30.00 processing fee deducted from cancellation refunds. A fee of \$20.00 will be charged for all returned checks. There is a \$10.00 charge for each change of reservation date.**

The \$100.00 security deposit paid with your reservation will be returned at the next bill paying session of the Parma Town Board (usually around the 15th of the following month), providing that renters leave the facility as they received it. All persons will be responsible for cleaning and restoration of the building, equipment, and grounds after the event. **A charge will be assessed from the deposit to bring the building and grounds back to the same condition as received.** As such, all damages must be reported to the Town Clerk's Office by 12 noon of the next business day.

Any organization which leases or uses parts of any building or grounds, except solely for meetings, picnics or celebrations, shall have in effect and supply proof of general liability insurance coverage.

This shelter shall NOT be used for personal profit. If air conditioning is used, all doors/windows MUST be closed.

Alcoholic beverages are permitted as specified in the Alcohol Permit, in the shelter and the immediate area of this rental facility, provided all those who consume alcoholic beverages comply with legal New York State drinking age and that the proper alcohol permit has been completed and filed with the Town of Parma (no additional fee). The Town of Parma is not responsible for any liability arising out of any alcohol related incidents.

If equipment, apparatus, decorations, animals, or other unusual items are brought onto this Town property, it must be so stated on this application, and all regulations set forth by the Town must be followed. (NOTE under Special Circumstances) The Town of Parma is not responsible for any liability for damage to any material, supplies and/or equipment.

Town attendant is responsible for opening and closing (locking and securing) the facility for your event. The attendant can be reached by calling (585) 230-3284 (this number is subject to change, if you cannot reach attendant contact 392-9461) and leave a message for opening and closing requests. If you would like to view the facility please call 739-3285. The person that reserved the VFW must be there at check in and remain for the entire event. Do not leave the building unattended during your event. The attendant and renter will go over an inspection check list before and after the event. Please be on time. If the attendant has to wait more than 30 minutes, \$25 will be deducted from the security deposit. The VFW must be cleaned up with people ready to leave at the agreed upon closing time. If you plan to leave earlier, call the attendant a minimum of 30 minutes ahead of time. In the event that the attendant is not there at the opening or closing time call the number above.

The party whose name appears on this application hereby assumes liability for all damages done to shelter, its contents, grounds, equipment, and supplies while occupying same and agree to indemnify the Town of Parma for all said damages. A signed indemnification agreement is required and must be received with the rental agreement. I also recognize the rental of these facilities may contribute to the transfer or transmission of an illness or disease, including but not limited to COVID-19, which could result in severe illness, personal injury, permanent disability and/or death. Same party agrees to observe all rules, regulations and policies outlined in this agreement. I have read all Rules and Regulations before signing this permit and agree to abide by them.

Signature of Responsible Party: _____ Date _____

-----FOR OFFICE USE-----

Permit # _____	Fee \$ _____	Security Deposit \$ _____	Total \$ _____	Paid by: Credit Card (Rental only) _____
				Cash _____ Check# _____

Date _____ Approved by _____ Ins. Indem. _____ Gen. Liab. _____ BAS _____ Rec1 _____ Copies (1) _____ Deposit V. _____

TOWN OF PARMA
1300 Hilton Parma Corners Road
Hilton, NY 14468

**INDEMNITY & HOLD HARMLESS
AGREEMENT**

To the fullest extent permitted by law, the event participant shall indemnify and hold harmless, and defend the Town of Parma, the Owner and their agents and employees from and against all claims, or actions based upon property damage, personal injury or illness resulting from any acts, omissions or any other matter whatsoever of the above mentioned event participant, its members, guests and invitees, and anyone directly or indirectly employed by event participant while participating in a Town of Parma sponsored event in the Town of Parma.

This agreement shall include indemnity to the Town of Parma for all costs, counsel fees, expenses or any other liability whatsoever, which may be incurred by the Town of Parma as a result of the above mentioned parties participation. The Town of Parma is hereby named as an additional insured on a primary and non-contributory basis.

Renter:

Print Name

Address

City State Zip

Signature

Date: ____/____/____

**V.F.W. POST 6105 LODGE
ALCOHOL PERMIT
FOR BEER AND WINE**

_____/_____/_____
Rental Date

Individual/Organization Requesting Permit

Individual/Organization Representative's Name

(_____)_____
Phone

New York State Law states that alcohol cannot be dispensed to minors under the age of 21 years. Violators will be prosecuted.

The only alcoholic beverages allowed under this permit are beer, wine, and wine coolers.

BY SIGNING THIS PERMIT, I agree to the stated regulations of the lodge rental agreement pertaining to alcohol and assume responsibility for any damages or legal ramifications. The Town of Parma shall not be held liable for any alcohol related incidents resulting from applicant's use of said premises.

_____/_____/_____
Date of Birth

Signature

(Must be 21 Years of Age)

**V.F.W. POST 6105
LODGE ACCOMMODATIONS:**

Lodge reservations are processed in person at the Parma Town Clerk's Office

For Lodge Availability Contact the Town Clerk's Office at 585-392-9461

To set up an Appointment to view this facility – call 739-3285 and leave a message

Utilization Hours: 8:00 a.m. to 11:00 p.m.

*Full Service Kitchen
Flush Facilities
Accommodates Parties Up to 99 people
Tables & Chairs included
Air Conditioned*

**V.F.W. POST 6105
LODGE RATES:**

FEE: \$285.00

SECURITY DEPOSIT: \$100.00
as specified in the LODGE UTILIZATION AGREEMENT

- Rates subject to change by the Parma Town Board
- Non-profit/Charitable requests must have prior approval - Contact Town Clerk

**FEE AND SECURITY DEPOSIT MUST
BE PAID AT TIME OF SECURING
RESERVATION**

**CHECKS MADE PAYABLE TO:
TOWN OF PARMA**

**PLEASE LEAVE THIS FACILITY
AS YOU RECEIVED IT**

LODGE CLEANING CHECKLIST

INSIDE:

- Tables cleaned and washed, placed back in proper configuration
- Chairs cleaned and properly set up
- Floors / walls clean and undamaged
- Restroom floors cleaned and free of debris mirrors cleaned, commodes flushed
- Within kitchen all dishes, silverware and cooking utensils cleaned and stored
- Counters, stove, oven sink, left clean
- Floor swept clean, spills mopped up
- All trash bagged, tied up & placed in dumpster
- Towels folded or hung on sink to dry (NOTE: These are not cleaning towels)

OUTSIDE:

- Walls, gutters, shutters, roof, free of marks and undamaged
- Exterior lights undamaged
- Building, Lawn and Parking area free of debris
- Exterior lights undamaged
- Building, Lawn and Parking area free of debris

**CLEANING SUPPLIES ARE AVAILABLE
AT LODGE**



Facility: _____ Reservation Date: ____/____/____

As renter of a Town of Parma Facility, I _____ understand:

- An inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. According to the CDC, senior citizens and guests with underlying medical conditions are especially vulnerable. By renting a facility with the Town of Parma, you voluntarily assume all risk related to exposure of COVID-19.
- All Mandated State Large Gatherings Guidelines will be monitored and followed.
<https://coronavirus.health.ny.gov/travel-large-gatherings-and-quarantines>
- Rental fees will be levied according to the fee schedule and will be due at the time of application.
- Cancellations must be made thirty (30) days prior to the scheduled event. To receive a refund prior to 30 days a \$30.00 processing fee will be deducted from the refund.
- There is a \$10.00 charge for each change of reservation date.

By signing the rental agreement attached, you agree to follow all State/County Large Gathering Guidelines at the time of rental and assume the risk that you will not get a refund if your party must cancel because it will not meet those requirements. The Town of Parma cancellation policy in place will be followed.

Signature: _____ Date: ____/____/____

Cancellations or date change requests must be received in writing. Please use the form below to request a date change or cancel your rental.

Cancel rental for: _____ on ____/____/____. Requests must be received 30 days prior to rental date and there is a \$30 cancellation fee. NO REFUNDS if within 30 days.

Change date of rental from: ____/____/____ to ____/____/____. Must be completed prior to rental date and subject to availability and \$10 fee.

Signature: _____ Date: ____/____/____

For Office use only: Date received _____ Approved: _____ Denied _____
Reason: _____