

DORIS CHANNELL CARDROOM
APPLICATION FOR USE OF THE JAMES P. NIX CENTER
1 Bayou Drive, Fairhope, Alabama 35632
(251) 928-2835

We the undersigned hereby apply for the use of the Doris Channell Cardroom at the James P. Nix Center and, in connection with said application, furnish the following:

We wish to use the Doris Chennell Room (Fairhope City Resident Rate \$500.00 / Non-Resident Rate \$750.00 for up to 4 hours); weeknights only, beginning no earlier than 5:00pm.

1. **Date Requested:** _____ **Hours: From:** _____ **To:** _____
These hours include final clean-up and bldg. secured.

2. **Renter's Name:** _____

Billing Address: _____ **Phone:** _____

City: _____ **State:** _____ **Zip:** _____ **Email:** _____

Person to Contact: _____ **Phone:** _____

3. **Purpose of use:** _____ 4. **Approximate # of Persons Expected:** _____

We further stipulate that we have read and understand all the rules and regulations according to **Resolution No. 5439-25** as set forth by the governing body of the City of Fairhope for the use of this facility and will abide by same and understand that if any required chaperones and/or law enforcement personnel are not present, the function will be terminated.

➡ **Renter's Signature:** _____ **Date:** _____

Fees Paid: \$ _____ **Receipt #:** _____ **Date:** _____ **City Personnel:** _____

James P. Nix Center Usage Cancellation Policy

Any and all cancellations or date changes must be in writing and signed by the application holder and must be given to the Rental Coordinator or Manager at the James P. Nix Center not less than sixty (60) days prior to the event for any refund to be given. Fee refunds will be made by check, less a 20% handling charge. No refunds will be made for cancellations made within sixty (60) days of the event.

I have read and understand the above policy.

➡ **Renter's Signature:** _____ **Date:** _____

City Personnel: _____ **Date:** _____

INDEMNITY AND HOLD HARMLESS AGREEMENT

In consideration of the permission granted to me by the City of Fairhope to use the James P. Nix Center of the City of Fairhope, I hereby indemnify and hold harmless the City of Fairhope, its agents, servants and employees from any and all claims and causes of action that may arise from injury to me or third parties using the facilities at the James P. Nix Center who are injured or suffer property damage that is in any way caused by my use of the James P. Nix Center. This indemnity and hold harmless agreement is given to the City of Fairhope to protect the city and its agents, servants and employees from the cost of defense and claims for injuries and damages that may be caused either directly or indirectly by my use of the James P. Nix Center.

➡ **Person or Company giving Indemnity:** _____ **Date:** _____

****NOTE: NO furniture in the cardroom is to be moved.**

FOR OFFICE USE ONLY:

Application _____ Cancellation Policy _____ Indemnity _____ Rental Fees _____ Outlook Calendar _____ Excel Schedule _____