



City of Miramar
Standard Facility Rental Application

Facility Requested/Event Location: _____ Date/s of Use: _____

Room Requested: _____

Estimated # of Participants: _____ Estimated # of Spectators (if applicable): _____

Name of Event:

Description of Event Activities:

Equipment/Set-Up Needs:

Event Time: _____ Clean-Up Time: _____

Alcohol Being Served: Yes No

Check One:

Private: Resident Non-Resident

Organization: Non-Profit Commercial: Miramar-based Commercial: Non-Resident

Name / Organization: _____

Who do you serve/population:

Address: _____ City: _____ Zip Code: _____

Website address (if applicable): _____

Contact #1: _____ Contact #2: _____

Phone #: _____ Phone #: _____

Fax#: _____ Fax#: _____

Email: _____ Email: _____

Alternate Signer (Day of Rental): _____

All Applicants

Special Requests

REQUEST FOR SPECIAL REQUESTS APPLICANTS ONLY:

City Proprietary Board/ Groups Governmental

Check One: City Co-Sponsored Host

Other event sponsors: _____

It would benefit the City of Miramar to co-sponsor/host this event because:

Has the City of Miramar previously sponsored/host an event with your organization? Yes No

If yes, please describe: _____

Is your organization Non-Profit? Yes No

Are proceeds to charity? Yes No

If yes, please list charity organization/s: _____

If yes, list percentage of proceeds to charity: _____% (*documentation will be required*)

Sponsorship check should be made payable to (business or organization):

Benefits

Sponsorship/host benefits available to the City of Miramar (check all that apply):

Banner Placement at events

Event product literature distribution How Many? _____

Places of Distribution: _____

Logo in advertisements

Logo on registration Forms

Logo on T-shirts () Logo on Flyers

Logo on posters

Radio recognition

Logo Link on website

(Please attach additional information on promotional materials)

ADDITIONAL:

Please list any other sponsorship/host benefits not named above:

SPECIAL REQUESTS APPLICANTS

If this application is for a event related sponsorship request(s), I understand completing this form is not an agreement, but a request for City of Miramar for event accommodations. All request(s) will be reviewed and provided a response.

ALL OTHER APPLICANTS and APPROVED REQUESTS

I have received rules and regulations and understand them. I am responsible for the actions of my group and that non-compliance with the rules or local laws shall result in revocation of the application, loss of security deposit and refusal of any subsequent application for a period time up to one year.

Name of applicant completing this form (*PLEASE PRINT*): _____ **DATE:** _____

Signature of applicant completing this form: _____

Department Head or designee: _____

STAFF RESPONSE BOX: utilized for special requests

City Manager and/or designee: _____ Date: _____

Approve Disapprove

Risk Manager _____ Date: _____

Approve Disapprove

FOR CITY USE ONLY:

Base Rental Fee	\$
Additional Event Hours (@ \$)	\$
Bar Rental	\$
Sub-Total	\$
Tax	\$
Security Deposit	\$
GRAND TOTAL	\$

PAYMENTS RECEIVED

Date	Amount	Balance	CK/MO #
	\$		
	\$		
	\$		
	\$		
Final payment due _____			
in full: _____			

STAFF CONTACT

Ansin Sports Complex: Billy Neal 954.602.4992	Sunset Lakes: Alma Rogers 954.602.3364	Miramar Cultural Center: Nanci DeJesus: 954.602.4513
Youth Enrichment Center: Sly Johnson 954.602.4784	Fairway Park: Randy Kaiser 954.967.1611	Town Center: Lolita Dunn 954.602.3325
Multi-Service Complex/ Civic Center: Khaye Curry 954.889.2704	Regional Park: Holly Hicks: 954.883.6950	Aquatics: Jorge Valls: 954.347.5872