

Facility and Fee Waiver Application

Event/Function Name: _____ Event Date(s): _____

Organization Name: _____

Organization Type: Profit Non-Profit Government Other _____

You must provide your Augusta/Richmond County Business License if you are a profit entity, your 501(c)3 documentation as a Non-Profit, or explain and provide documentation for other.

Organization Address: _____ City: _____ State: _____ Zip: _____

Contact name and title: _____

Phone: _____ Cell: _____

Email: _____ Web: _____

Event Location: _____ Contract/Reservation #: _____

Requested Percentage to be waived: 25% 50% 75% 100%

Event Type: Fundraiser Community Event Private Event Other

Please give any specific details or comments that may assist the fee waiver committee in its decision and/or explain other event type if indicated:

*****OFFICE USE ONLY*****

Committee Recommendation: _____ Committee Signature: _____

Director Approval: _____ Director Signature: _____

BL# or 501(c)3: _____ RSVD: _____ ARPD Contact: _____

CMT MTG Date: _____ APPLICATION RCVD _____ By: _____

Facility and Field Fee Waiver Application

Requests for fee waivers or reduced fees are determined on a case by case for community based events and community fundraisers that are aligned with the mission of Augusta Recreation and Parks. **Fee waivers or reduced fees on rentals of facilities and fields must be recommended by the Recreation Fee Waiver Committee and approved by the Director of Augusta Recreation and Parks.**

Eligible Organizations:

- **Non-profits with current 501(C)3 status.**
- **Clubs and organizations that provide educational or community program opportunities that are open to the general public and who donate services.**
- **Augusta, Georgia departments who are utilizing ARPD rental space for official City of Augusta business.**

Requirements:

This application does not guarantee the availability of ARPD location(s) and/or equipment.

You must have completed all applicable reservation procedures, including but not limited to reserving the facility and/or equipment and have paid the security deposit and fundraising fee (if applicable). You and the organization you represent are required to follow all established permit regulations and ARPD rules during and after the event.

In order for your application to be considered you must complete this list of requirements. If you fail to comply with this list, the application will be denied.

- Complete the attached request for reduced or waived fees, partnership/sponsorship addendum, application questionnaire and attach a copy of your completed rental or equipment use application permit.
- Submit all required information to be reviewed by the appropriate Recreation and Parks Staff. Any portion of the rental that takes place prior to Recreation and Parks Staff approval must be paid in full and will not be considered for waiver.
- You must have paid all refundable deposits prior to submittal in order for your application to be considered. These fees cannot be waived. Attach a copy of the receipt showing all mandatory fees being paid.
- If your agency is a non-profit, a copy of your current 501 (c)3 must be attached.
- Event must benefit the Augusta community and be relative to the mission of ARPD.

Non-Waivable Fees:

All renters regardless of waived or reduced fees will be required to pay the full security deposit, application fee, mobile stage fee, picnic shelter fee, concession building fee, extra fees and other fees that are established and associated with cleaning, staff time, setup/dismantle and custodial services.

Facility and Field Fee Waiver Application Questionnaire

Provide the Mission Statement of your non-profit group. _____

How does the proposed event benefit Augusta, Georgia? _____

What is the uniqueness of the proposed event? _____

How long has the sponsoring organization been in operation? _____

Has the sponsoring organization previously produced event(s) in Augusta, Georgia? _____

If so, please identify those events. _____

Does the sponsoring organization have staff or volunteers to facilitate this event? _____

Provide an itemized budget for the proposed event. _____

Will the proposed event impact local business and if so, please describe that impact? _____

Is the sponsoring organization collaborating with any other non-profit group? _____ If so, please state the commitments of all other groups. _____

Will the sponsoring agency use collaborative advertising and promotions? _____ If so, provide details including all groups involved and all forms of media to be used. _____

Has the sponsoring organization solicited local vendors to support the event? _____ If so, please identify all vendors that have committed to the event. _____

How will the sponsoring organization market the event? _____

Identify all forms of advertisements to be used _____

Provide a timeline for all promotions and advertising. _____

(Attach additional pages to expand on any answers to any questions.)

Additional Agencies Information

Agency: _____ Partner _____ Sponsor

Contact Name: _____ Title: _____

Phone: (0) _____ (C) _____

Email: _____ Web: _____

Type of support to be provided: _____

Agency: _____ Partner _____ Sponsor

Contact Name: _____ Title: _____

Phone: (0) _____ (C) _____

Email: _____ Web: _____

Type of support to be provided: _____

Agency: _____ Partner _____ Sponsor

Contact Name: _____ Title: _____

Phone: (0) _____ (C) _____

Email: _____ Web: _____

Type of support to be provided: _____

Agency: _____ Partner _____ Sponsor

Contact Name: _____ Title: _____

Phone: (0) _____ (C) _____

Email: _____ Web: _____

Type of support to be provided: _____