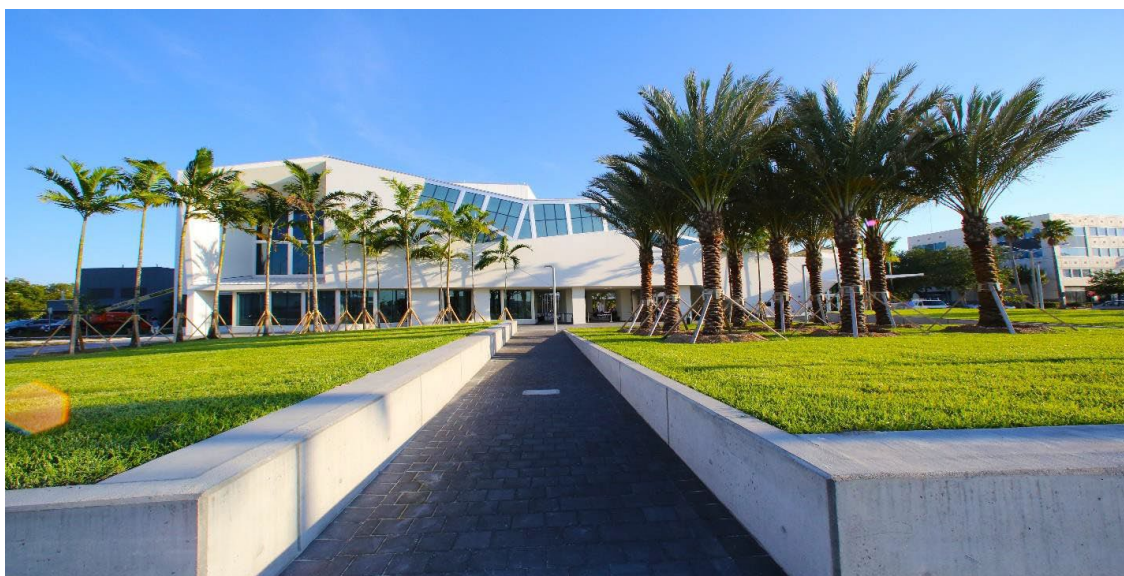


# City of Pompano Beach

## Cultural Affairs Department

Applications that are submitted less than 60 days of your event date may not be considered.

### ***FACILITY PERMIT***



Facility Name: \_\_\_\_\_ Rental Date: \_\_\_\_\_

Please fill out this application and bring this to

***Pompano Beach Cultural Center***

50 W Atlantic Blvd, Pompano Beach, Fl, 33060

**Call 954-545-7800 with any questions.**

**\*Please note that an application does not reserve or guarantee a date. A Security Deposit/Application Fee must be made to reserve the dates/ times applied for. \***

**PRIMARY CONTACT / APPLICANT:**

NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

NAME OF ORGANIZATION (if applicable): \_\_\_\_\_

TAX EXEMPT ID (If applicable) \_\_\_\_\_

Website: \_\_\_\_\_

**SECONDARY CONTACT / APPLICANT:**

NAME \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

**PRODUCTION COMPANY (if applicable)**

NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

TAX EXEMPT ID (If Applicable) \_\_\_\_\_

**CHECK ONE:**

☐ Individual      ☐ Non-Profit      ☐ For –Profit

☐ School      (Public/Charter/Private, Daycare, Pre-k, K-12)

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☐ INTERNAL

(City of Pompano Beach Employee Only)

(\*Event Must Be City Sponsored/On Behalf of the City\*)

DEPARTMENT: \_\_\_\_\_

**CHECK IF APPLICABLE:**

☐ ARE YOU A CITY OF POMPANO BEACH RESIDENT?

(\*For proof of residency, please provide a copy of your VALID driver's license and a current (6 months or less) utility bill.)

☐ ARE YOU A RETURNING RENTER?

**CHOOSE FACILITY/ROOMS/AREAS:**

☐ Pompano Beach Cultural Center (Choose Rooms/Area Below)

*\*50 W Atlantic Blvd, Pompano Beach, FL 33060*

☐ Theatre      ☐ Lobby      ☐ Terrace      ☐ Multi-Purpose Room      ☐ Kitchen/Refrigerator

☐ Dressing Rooms (2)      ☐ Green Room

*\*Capacity of Room/Area Depends on Setup / Layout, for specifics please call 954-545-7800 or email PBArtsinfo@copbfl.com\**

☐ Historical Ali Cultural Arts Center

*\*353 Dr Martin Luther King Jr Blvd, Pompano Beach, FL 33060*

☐ Courtyard (Outdoors/Covered)      ☐ Stage      ☐ Kitchen/Concession Window

☐ Blanche Ely House      ☐ Courtyard (Outdoors/Covered)

*\*1500 NW 6th Ave, Pompano Beach, FL 33060*

(Once issued, Room capacities must be respected in accordance with City Codes/Culture Affairs Staff. The rental will be terminated immediately for non-compliance.)

**Type of Event:**

- **How many people are you expecting including audience, staff, crew, etc?** \_\_\_\_\_
- **Have you done this event/production anywhere else?** ☐ YES ☐ NO,
  - **IF YES, Name of Location and Dates**  
\_\_\_\_\_
- **Have you produced any other events?** ☐ YES ☐ NO,
  - **If YES, Where?**  
\_\_\_\_\_

[illegible]

## ADMISSION/TICKET FEE

Is There an Admission/Ticket Fee? ☐ YES ☐ NO

IF YES, Please List all Price(s) and Explanation of what is Included  
(Include *ALL* categories being sold (Adult, Child, Senior, Veteran, Etc.)

*EXAMPLE: \$25 Adult Banquet Ticket (18+ Years Old) Includes Entrance/ Dinner /Drink*


What will be your ticketing platform? (Online, At Door, Etc.)

\_\_\_\_\_

Will you have staff to operate your ticketing? \_\_\_\_\_

Will tickets be sold at the door? \_\_\_\_\_

How can people pay for their tickets? \_\_\_\_\_

## PRODUCTION (For Performances, Shows, Musicals, Concerts ONLY.)

? How long is your event? \_\_\_\_\_

? How many performers/participants in this event? \_\_\_\_\_

*\*A Separate List with all performers /participants will need to be submitted to the Event Coordinator.*

? How long will the PERFORMANCE be? (Not total rental time) \_\_\_\_\_

? Is there an Intermission/How Long is the intermission?

\_\_\_\_\_

? Will you be selling any merchandise? (If using Vendors Please fill out *Vendor* section on pg.#8)

\_\_\_\_\_

## DATES REQUESTED:

### CHECK ONE:

☐ SINGLE EVENT (1 Day)

☐ MULTIPLE DATE(S) EVENT (2+ Days)

*(If event is 3+ days or more, approval must be given before application is submitted.)*

*Please Call 954-545-7800 or Email [PBArtsinfo@copbfl.com](mailto:PBArtsinfo@copbfl.com) for approval.)*

### LIST DATES BELOW

(One Date Per Line)

DATES REQUESTED
1.
2.
3.
4.
5.
6.
7.

\*Rentals on Sunday will be charged an additional fee of \$50 per hour \*

Is your date flexible? ☐ YES ☐ NO

If NO, let us know your second desired date (s)

DATES REQUESTED
1.
2.
3.
4.
5.
6.
7.

## TIMES REQUESTED:

### Total Time(s) Needed (Include Set Up / Break Down)

Date	LOAD IN OF VENUE	EVENT START	EVENT END	LOAD OUT OF VENUE
1.				
2.				
3.				
4.				
5.				
6.				
7.				

## TABLES, CHAIRS, & LINENS

### Table and Chair Fee- \$100

*(Fee May Be Waived Depending on Rental)*

Tables: ☐ YES ☐ NO (Please refer to inventory, anything beyond what we have will not be provided -including tables and chairs.)

Chairs: ☐ YES ☐ NO

Tablecloths: ☐ YES ☐ NO (City department use only. Anyone renting will need to provide their own tablecloths. )

☐

### Bringing my Own Equipment

Tables: ☐

Chairs: ☐

Tablecloths: ☐

*(Please Specify)*

## VENDOR / CATERING

**Please List all Catering/Vendors Being Used for your Event.**

\*Please note that vendors will need to present additional documents including a COI with liquor liability. \*

COMPANY NAME	PHONE #	EMAIL	TYPE OF SERVICE

## TECHNICAL / EQUIPMENT

*\*Additional fees may apply with use of equipment \**

Podium: ☐ YES ☐ NO

Microphones: ☐ YES ☐ NO

(If the Event is not a Production/Show, Handheld Wireless/Wired Microphones will be available)

*IF YES, How Many?* \_\_\_\_\_

Microphone Stand: ☐ YES ☐ NO

Projector With Screen or Large Flat Screen TV: ☐ YES ☐ NO

*\*We do not provide a computer, Apple/PCs can be used\**

☐

**Bringing my Own Equipment**

*(Please Specify)*

\_\_\_\_\_

\_\_\_\_\_



## AUDIO / VISUAL

Cultural Center Theatre / Historical Ali Cultural Arts Center Courtyard Stage

Stage Lighting: ☐ YES ☐ NO

Sound System (Speakers): ☐ YES ☐ NO

☐ Bringing own equipment (Please Specify)

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## ELEVATED STAGE

☐ I would like to use elevated stage and understand that this will cover a limited area of the stage, I also understand this is an additional fee to my rental.

☐ I am using my own elevated stage and understand the risks involved.

## LIVE AUDIO/ENTERTAINMENT

(Please Select, if using live audio/entertainment, this must be notated or application, contract, and event may be terminated)

☐ Band, Orchestra, Chorus

NAME: \_\_\_\_\_

What type of band/orchestra? \_\_\_\_\_

List Instruments \_\_\_\_\_

How many people total? \_\_\_\_\_

☐ DJ

NAME: \_\_\_\_\_

What type of equipment is being used \_\_\_\_\_

Karaoke/Trivia/ Game/Activity? \_\_\_\_\_

☐ MC/Live Entertainment (Please Specify)

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## STAGE

**Will you be using the STAGE?**

(Cultural Center Theatre or Ali Courtyard)

☐ YES ☐ NO

**What will be needed for the stage?**

*UPON REQUEST:*

*(2- 6 Ft Rectangle Tables, 4 Chairs, 2 Spandex Table Cloths, and Podium are available for stage use, No Additional Fee) (Additional Fees may be applied for additional tables, chairs, & equipment not listed)*


## TECHNICAL STAFF

**If using the Cultural Center Theatre / Historical Ali Cultural Arts Center Courtyard Stage with Technical needs, an additional hourly charge will be added to provide staff to operate/coordinate necessary equipment. Final prices will be shown on quote.**

*for questions, please call 954-545-7800 or email [PBArtsinfo@copbfl.com](mailto:PBArtsinfo@copbfl.com)*

## CLEANING

**For all events, a \$300 Cleaning Fee will be applied for Custodial Services  
(Pre/Post Event sweeping and mopping the facility, Restroom Cleaning, Trash Disposal)**

***PLEASE BE ADVISED***

*Event space must be returned in the same condition it was issued or additional fees may be applied.*

*All trash must be disposed of properly in provided receptacles/trash bags.*

## ADDITIONAL REQUESTS

Please List Any Additional Request for

### TECHNICAL / EQUIPMENT or AUDIO / VISUAL


## SETUP

Please provide a brief summary of your setup for your event.


## CHECK IN / CHECK OUT

At the beginning and end of your rental, please check in with the event coordinator/supervisor to do a pre/post event walk-through of the space, failure to do this will result in your deposit being held.

## ARRIVING EARLY/ DEPARTING LATE

Please note that the space is available only during times listed on the permit INCLUDING SET UP AND BREAKDOWN, using the space early / or staying later than listed times will result in deposit being held, additional fees for staffing, security, cleaning, and additional hourly cost of venue to be billed to primary contact applicant.

## SETUP (VISUAL)

In the blank space below, please sketch a basic layout of your planned event for ALL rooms / areas being used.

## ALCOHOLIC BEVERAGES/BARTENDING

Culture Affairs Dept. will not provide a Bar Service to Sell Alcoholic & Non-Alcoholic Beverages at your event. You will be responsible for hiring a caterer that has a liquor license. A COI with liquor liability is required.

- ☐ A caterer will be hired. I understand what is required.
- ☐ I am providing beer/wine only and will provide proof of liquor liability.
- ☐ I do not plan on having any alcohol.

*\*If you wish to have your own service/company or would like to serve your own Alcoholic Beverages please call 954-545-7800 or email [PBArtsinfo@copbfl.com](mailto:PBArtsinfo@copbfl.com)\**

### ***FOLLOWING APPLICATION FILL OUT ALCOHOL PERMIT***

STAFF APPROVAL:

Culture Affairs STAFF: \_\_\_\_\_ Company/Self Serving: \_\_\_\_\_  
☐ APPROVED ☐ DENIED

## SECURITY

IF YOU ARE SERVING ALCOHOLIC BEVERAGES, please see next section

*SECURITY WITH ALCOHOLIC BEVERAGES (attach cultural affairs alcohol permit application)*

An Unarmed Security Guard (One or More) depending on the size of your event will be included in your event at \$25 per hour. This cost will be added on your final quote.

A Broward Sheriffs Police officer is available for your event at \$65 per hour as an alternative.

## SECURITY WITH ALCOHOLIC BEVERAGES

IF YOU ARE SERVING ALCHOLIC BEVERAGES

A Broward Sheriffs Police Officer and/or unarmed security guard is **REQUIRED** for your event.

Please Select Below:

- |  |               |
|--|---------------|
| <input type="checkbox"/> Unarmed Security Guard (\$25 Per Hour)                          | Quantity_____ |
| <input type="checkbox"/> Broward Sheriffs Police Officer (\$65 Per Hour, 3 hour minimum) | Quantity_____ |

## PRODUCTION MEETING

To help you have a successful event, we will be reaching out to you prior to your event for a **Production Meeting**. This will include all necessary technical and administrative staff to help plan the day (s) of your event. Please make sure to respond in a timely manner to schedule this meeting and bring all necessary person(s) and documents needed. **You may be asked to provide an Event Planner for events using multiple spaces, attendance exceeding 180 people, coordinate tables, chairs, and props, and to coordinate clean-up. Documentation relating to hiring an event planner may be required.**

## FOOD/KITCHEN USE (commercial licensed kitchen)

Do you plan on having food at your event? ☐ YES ☐ NO

How do you plan on serving the food?

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Will the food need to be warmed upon arrival? ☐ YES ☐ NO

Do you plan on using the kitchen? ☐ YES ☐ NO

*IF Yes Please Check any appliances you need access to,*

(Please note, some appliances are not available at all locations. Kitchen is for warming food only.)

☐ Ice Machine

☐ Microwave

☐ Coffee Maker (Industrial)

☐ Industrial Warming oven

☐ Fridge

## INSURANCE

*Please read and initial*

\_\_\_\_\_ Event Insurance Must Be Purchased for your event with a \$1 million liability coverage, 2 million aggregate coverage. This must be received by the Culture Affairs Department no later than 30 days before your event. Failure to do so may result in cancellation of event and forfeit of all fees paid.

\_\_\_\_\_ If vendors fail to provide required documents/insurances for businesses/services, they will be unable to participate in your event. Failure to comply with this will result in immediate event cancellation.

## DEPOSIT/APPLICATION FEE

Deposit: \$200

Application Fee: \$50

Deposit and application fee must be paid following submission of Facility Application.

## PAYMENT

**\*Payment for remaining balance must be paid within 15 days after payment for deposit/application fee. \***

Payments are accepted *In Person* at the

Pompano Beach Cultural Center, 50 W Atlantic Blvd, Pompano Beach, Fl, 33060

*Tuesday -Saturday 10AM-5:30PM*

*\*Saturdays 10AM to 3:30 PM\**

## PAYMENT METHOD

Please select your payment method below

☐ Card (Credit or Debit)

☐ Check (Must be addressed to "City of Pompano Beach.")

☐ Money Order (Must be addressed to "City of Pompano Beach.")

*No cash is accepted at this time*

## OFFICE STAFF:

Date of payment: DEPOSIT: \_\_\_\_\_

BALANCE: \_\_\_\_\_

Receipt # \_\_\_\_\_

Household # \_\_\_\_\_

☐ Entered into RecTrac

☐ Entered into Dept. Calendar

Name On Card/Check \_\_\_\_\_

Last 4 # of Credit Card / Check #/ Money Order #: \_\_\_\_\_

☐ Verify ID

# FACILITY GUIDELINES

Please Read and Initial Below

## MISREPRESENTATION OF EVENT

Any misrepresentation as to the nature of the event, the number of attendees expected, contact or payment information or any other falsification of application documents will result in the immediate cancellation of the event and forfeiture of fees paid and may also result in denial of future rental requests and/or legal action.

Initials: \_\_\_\_\_

## CATERING AND INSURANCE

All catering agreements must be noted on the Facility Application. All food must come prepared. On-site cooking is prohibited. Prior to the rental of the facility, proof of insurance will be required with the policy naming the City of Pompano Beach as an additional insured so as to provide adequate coverage for the protection of the City and its property. The City's Risk Management Department shall determine insurance limits if needed.

Initials: \_\_\_\_\_

## CONDUCT AND PARKING

The applicant will be responsible for the conduct of all members of their party. Persons acting in a disorderly conduct or causing disturbance of the public peace will be required to vacate the premises. The City reserves the right to terminate this agreement effective immediately in the event that the rental party is involved or becomes involved in behavior which exhibits aggressive or violent tendencies, whether physical or verbal, and or promotes or incites violence or aggressive behavior, which results in physical altercations, fighting and/or rioting, and/or if said behavior results in any property damage to the rented facility. In the event this agreement is terminated the City also reserves the right to deem the renter ineligible to rent from the City of Pompano for a term of one year. All vehicles must be parked in designated areas only. Any other arrangements must be approved and noted on the Facility Application.

Initials: \_\_\_\_\_

## AMPLIFIED MUSIC AND INTOXICANTS

Amplified music must be notated on application. Use of illegal drugs, smoking (Cigarettes, Electronic Vaporizers, Hookahs, or anything deemed unsafe by management) and/or gambling is prohibited.

Initials: \_\_\_\_\_

## SALE OF GOODS, RAFFLES, AND ADMISSION

The sale of any article, food, beverage, or "pay at the door" events must be approved and noted on the Facility Application.

Initials: \_\_\_\_\_

## FACILITY EQUIPMENT

Facility rentals that include the kitchen provides for equipment such as an ice machine, refrigerator, freezer, microwave oven, etc. The care of this equipment is a part of the application's security deposit. City-owned equipment made available and used by the rental group must be thoroughly cleaned (includes tables, chairs, kitchen facilities and equipment). Facility staff will provide trash can liners and are responsible for sweeping and mopping the facility. The City of Pompano Beach Culture Affairs Department does not assume responsibility for personal property left unattended in City facilities.

Initials: \_\_\_\_\_



**HEALTH AND SAFETY**

The City of Pompano Beach prohibits the use of plastic straws and Styrofoam/expanded polystyrene food service articles. Ordinance 96.61 & 96.62

Initials: \_\_\_\_\_

**CHANGES AND CANCELLATIONS**

In the event a cultural facility rental is cancelled at least 72 hrs. prior to the event date, the Department will refund 75% of the total rental fee. No refunds of the facility rental fee will be made for cancellations that are less than 48 hrs. from the event date.

Initials: \_\_\_\_\_

Non-compliance with any of the above stated rules may result in revocation of application, loss of security deposit, and refusal of any subsequent application for a period of up to one (1) year. The City of Pompano Beach reserves the right to revoke applications or make change for the convenience of the City. The deposit will be returned within 45 days after the event.

By signing below, I acknowledge that approval of this application by the City of Pompano Beach does not make the City a participant in, or a sponsor of, the event. The undersigned does hereby agree to indemnify, defend, and hold harmless the City of Pompano Beach and all of its officers, officials, directors, managers, employees, commissioners, agents, staff, volunteers, advisors and/or representatives from and against any and all liabilities, claims, demands, causes or action, and loss (including attorney's fees) which may be brought or imposed on or incurred by any of them arising from any negligence or other acts or omissions of the undersigned, its agents and/or its employees and/or any event participants, alleged to have caused in whole or in part any injury to any person(s) or damage to any property occurring during participation in, or caused as a direct or proximate result of, this event.

Primary Applicant (Print Name) \_\_\_\_\_

Primary Applicant Signature \_\_\_\_\_

Please hand or email this application to Cynthia Smith: [cynthia.smith@copbfl.com](mailto:cynthia.smith@copbfl.com)

Secondary Applicant (Print Name) \_\_\_\_\_

Secondary Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Box Office Coordinator Signature: \_\_\_\_\_

Cultural Affairs Manager Signature: \_\_\_\_\_

Cultural Affairs Director Signature: \_\_\_\_\_

DEPOSIT RETURNED? ☐ YES ☐ NO STAFF \_\_\_\_\_