



# EVENT RESERVATION APPLICATION

FRIENDS OF HEMMING PARK  
303 N. Laura Street, Suite G5  
Jacksonville, FL 32202

hemmingpark.org  
Phone: (904) 515-5098  
Fax: (904) 515-5098

## Applicant Information

Organization Name / Client

Co-Promoters involed with this Event

Organization's Website(s)

Social Media

## Contact Information

Contact Name

Email Address

Primary Telephone Number

Street Address

Alternative Telephone Number

City State

FAX

Zip Code

## Event Information

Name of Event

Date(s) Requested

Park Area(s) Requested Purpose of Event

\_\_\_\_\_

\_\_\_\_\_

Principal Beneficiary(ies) of Event

Estimated Attendance

## TIMING DETAILS

Load-in Begins: \_\_\_\_\_

Event Begins: \_\_\_\_\_

Event Concludes: \_\_\_\_\_

Load-out Begins: \_\_\_\_\_

Load-out Concludes: \_\_\_\_\_

## Insurance Information

Insurance Provider

Agent Name

Insurance Company Phone

\*Insurance information is not required at time of application but must be submitted within \_\_\_ days of approval.

**Additional  
Event  
Information**

Is this event open to the public free of charge? YES NO

Is there an Admission/ Entry Fee for this event? YES NO

• If yes, list fee amount: \_\_\_\_\_

Is any portion of this event closed to the public? YES NO

Is this event a fund-raiser? YES NO

Will sales occur during this event? YES NO

• If yes, circle type:                      Food & drink                      Alcohol                      Merchandise

**Alcohol sales must coordinate with Hemming Park. Additional fees may apply.**

Will free items be distributed during this event? YES NO

•Please describe: \_\_\_\_\_

\_\_\_\_\_

Will cooking occur during this event? YES NO

•If yes, please provide details: \_\_\_\_\_

\_\_\_\_\_

Will this event require electricity? YES NO

Will this event utilize amplified sound for music or speakers? YES NO

•If yes, will you provide PA or desire rental?                      Provide                      Rental

Will this event require onsite vehicle access? YES NO

•If so please describe: \_\_\_\_\_

\_\_\_\_\_

*\*\* Note: This option may not be possible*

Are sponsors involved with this event? YES NO

•If yes, please list sponsors: \_\_\_\_\_

\_\_\_\_\_

Will there be organizational and/or sponsor signage visible onsite? YES NO

Will information/ goods/ promotional materials be distributed? YES NO

•If so please describe: \_\_\_\_\_

\_\_\_\_\_

How will this event be promoted?                      Radio    TV    Print    Posters    Others  
(Circle all that apply)

•Please provide detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you want this event to be listed on the Hemming Park website? YES NO

Contact us at 904-515-5098 with any questions.  
Fax or email completed form to:  
Email: events@hemmingpark.org / Fax: 904-515-5098

**Authorized  
Credit Card**

Credit Card Information:

Visa, Mastercard, Discover  
OR American Express #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Street Address: \_\_\_\_\_

Billing City and State: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_

Name on the Card: \_\_\_\_\_

Security Code: \_\_\_\_\_

**Authorization**

\_\_\_\_\_  
Authorized Client Representative (PRINT NAME)

\_\_\_\_\_  
On-site Designated Person(s) in Charge

\_\_\_\_\_  
On-site Designated Person(s) in Charge

\_\_\_\_\_  
Emergency Contact Person

**FALSIFICATION AND/OR MISREPRESENTATION IN COMPLETING THIS APPLICATION MAY RESULT IN RATE  
ADJUSTMENT OR REVOCATION OF EVENT**

I UNDERSTAND THAT CHANGES TO THE DETAILS OF THIS EVENT REQUIRE IMMEDIATE WRITTEN NOTIFICATION TO HEMMING PARK'S EVENT STAFF. I HAVE READ AND UNDERSTAND FRIENDS OF HEMMING PARK'S POLICIES AND PROCEDURES

\_\_\_\_\_  
Signature of Authorized Client Representative

\_\_\_\_\_  
Date

The approval, denial or approval with special conditions of this application are at the sole discretion of Friends of Hemming Park.

YOU WILL BE NOTIFIED OF THE STATUS OF YOUR APPLICATION WITHIN 14 BUSINESS DAYS FROM RECEIPT OF APPLICATION. CREDIT CARD STATEMENT WILL REFLECT CHARGE BY "FRIENDS OF HEMMING PARK".

## Hold Harmless and Indemnification Agreement

By signing the below the:

Applicant releases and forfeits any right of action against I3-Jax DBA Friends of Hemming Park, the City of Jacksonville or its members, officials, employees and agents from any liabilities, claims for damages, losses, and costs which arise out of or in connection with their participation in the event and to the fullest extent permitted by law, indemnifies, defends and saves I3-Jax DBA Friends of Hemming Park, the City and City's members, officials, officers, employees and agents harmless:

(1) against all liability, claims for damages, and suits for or by reason of any injury to any person, including death, and damage to any property for every cause in any way connected with the event irrespective of negligence, actual or claimed, upon the part of the City, its agents and employees, except where caused by the willful and wanton acts of I3-Jax DBA Friends of Hemming Park, the City of Jacksonville officials, officers, employees and agents, and

(2) from all expenses incurred by the I3-Jax DBA Friends of Hemming Park or the City of Jacksonville for police protection, fire protection and emergency medical services, restoration and clean up, sanitation and maintenance costs and expenses that are required to preserve public order and protect public health, welfare and safety at the event.

The Applicant shall also agree to indemnify I3-Jax DBA Friends of Hemming Park, the City and City's members, officials, officers, employees and agents against all charges, expenses and costs, including the reasonable value of the services of the Office of General Counsel, incurred on account of or by reason of any such injuries, damages, liability, claims, suits or losses and all damages growing out of the same.

Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant or Authorized Representative Name

Rev 7/2014

\_\_\_\_\_  
Applicant or Authorized Representative Signature

\_\_\_\_\_  
FOHP Authorization

\_\_\_\_\_  
Date

**Application Fees are non-refundable and must be received in order to process any application.  
Applications will not be considered until fees are received.**

**OFFICE USE ONLY:**

\$100.00

\$200.00 (within 10 business days of event date)

Date application was received:

\_\_\_\_\_