

PERMIT

OUTSIDE USER POLICY; APPLICATION FOR USE OF MUNICIPAL FACILITIES – PART 2

PLEASE PRINT

MUNICIPALITY: _____ Facility: _____

APPLICANT: _____ Name of Contact Person: _____

Address: _____ Postal Code: _____ Telephone: _____

Time of Use applied for: From: _____ AM PM Date: _____ To: _____ AM PM Date: _____

Particulars of Activity: _____

Number of Participants Expected: _____ Age of participants: _____

Name of Supervisors: _____ Telephone: _____

Requirements: (Facilities/equipment)

Arena Swimming Pool Meeting Room # _____ Shops Auditorium/Theatre Hall/Multi-purpose room Soccer/baseball field

Other: _____

Type and Quantity of Equipment, if required: _____

Other terms or conditions: _____

Liability Insurance

____ Applicant has and will provide Confirmation of liability insurance

- or -

____ Coverage required by user, see Chart on next page

Premium: \$ _____

Rental/Other Fees

1. Use of Facilities \$ _____

2. Caretaker \$ _____

3. Security \$ _____

4. Liability Insurance Premium \$ _____

Total Amount Due: \$ _____

This is to certify that I (My organization), while occupying said facilities, will provide and be responsible for adequate adult supervision and the security of municipal property and will abide by all rules and regulations as established by the MUNICIPALITY. I (we) agree to pay for any damages incurred to property and/or equipment and to pay rental fees as outlined. The permit holder (user group) will protect, indemnify and hold harmless the MUNICIPALITY and its agents from all claims for damages that may arise out of the use of buildings, grounds or equipment by the permit holder. If liability insurance premium is not indicated above, the permit holder (user group), agrees to obtain his/their own liability insurance for this event.

Dated this _____ day of _____, 200____ Signed (Contact person): _____

Permit approved by (Facility/Property Designate): _____ Date Issued (d/m/yr): _____ / _____ / _____

OUTSIDE USER LIABILITY INSURANCE RATES - \$2,000,000 COMMERCIAL GENERAL LIABILITY

PLEASE CIRCLE APPROPRIATE PREMIUM **

**** In accordance with the Province of Manitoba's 2012 Budget 7% Retail Sales Tax (RST) is applicable to insurance contracts as of July 15, 2012, therefore 7% must be added to the premiums indicated below ****

SPORTS	Number of Participants	Premium **		
		One Day	Two Days	Seasonal
Badminton, Dance Lessons, Horseshoes, Tennis Curling, Bowling, Skating	1 - 25	\$25	\$50	\$75
	26 - 100	\$50	\$100	\$150
	101 - 250	\$75	\$150	\$225
	Over 250	Refer	Refer	Refer
Baseball, Basketball, Field Hockey, Floor Hockey, Handball, Racquetball, Soccer, Squash, Softball, Volleyball, Swimming with Lifeguard, Non-Contact Touch/Flag Football, Track & Field	1 - 25	\$50	\$75	\$150
	26 - 100	\$100	\$150	\$300
	101 - 250	\$150	\$225	\$450
	Over 250	Refer	Refer	Refer
Occasional Pool Use	1-2 hours	\$25		
	Over 2 hours	\$50		
Recreational Non-Contact Ball Hockey	Pick-up-Max 30 Players	\$50	\$75	\$100
	League	Refer	Refer	Refer
Recreational Non-Contact Ice Hockey Adult Pickup - Max. 30 players Adult League	Season September - April		Season May - August	
	\$125 \$225/ team		\$100	Refer
Adult Tournaments - Non-Contact Only One time recreational adult hockey One time recreational skating No Sticks or Pucks	Up to 8 teams		\$250	
	9 - 16 teams		\$375	
	1 - 30 players		\$25 (max 11/2 hrs)	
	1 - 25 participants		\$25 (max 11/2 hrs)	
	26 - 100 participants		\$35 (max. 11/2 hrs)	
Beer Garden - applicable to sporting events only	101 - 250 participants		\$100/day	
	251 - 500 participants		\$150/day	
	Over 500		\$200/day	
			Refer	
MEETINGS & OTHER EVENTS	Number of Participants/Attendees	Premium **		
		Day	2 -3 Days	Over 3 Days or Seasonal
No Alcohol: Example: Arts & Crafts, Socials, Weddings, Church meetings, Rummage Sales, Prenatal Classes, Seniors Group Meetings, Family Reunions, Teas Homecomings, Birthday and Anniversary Parties	1 - 25	\$25	\$50	\$75
	26 - 100	\$50	\$100	\$150
	101 - 250	\$100	\$200	\$300
	251 - 500	\$150	\$300	\$500
	Over 500	Refer	Refer	Refer
With Alcohol, Add to above premiums:	1 - 25	\$75	\$150	\$225
	26 - 500	\$125	\$250	\$375
	Over 500	Refer	Refer	Refer

Activities Not Listed-Contact L. Baker at Western Financial Group Insurance Solutions Phone 800-665-8990 Ext. 7220