Please Type or Print Clearly - (Application Form)

Name _______________________________________________________________________________________
Organizational Group/Individual _______________________________________________________________________
Organization Mailing Address ________________________________________________________________________
City __________________________ State _______ Zip Code ____________________
Phone Number _______________ Cell ____________ Email Address _________________________________
Designated Responsible Official(s) _______________________________________________________________________
Describe Type of Event _______________________________________________________________________________________
Number of Participants/Spectators Expected (Max Capacity is 1,600) ____________________________________________
Date(s) Requested ____ / ____ / ________ to ____ / ____ / ________ Day(s) of week __________ Time(s) of day ______ to ________
Include set-up, break-down, and clean-up time in time(s) requested.
Check all that apply.
I would like the Bleachers Extended for Seating _______ (SEATS 600)
I would like to use the City Arena Catering Kitchen ____________ Caterer for event will be: _______________________________
I would like to use the City Arena Conference Room _____________
I would like to rent the City Arena Conference Room Only _______________

• Please note the parking map attached. Parking is available on the “immediate grounds” of the arena. This includes the areas outlined in black in the attached photo, comprising approximately 290 parking spaces
• The adjacent property south of City Arena is under the jurisdiction of Historic Camden Foundation (HCF). Request to use/rent their property must be coordinated directly with HCF (803)432-9841.

Food and/or Product Sales? Yes ____ No ____ (If yes, City of Camden Special Events Business License Required Contact City Arena Lease Coordinator at Camden City Hall at least two weeks prior to Event)

Certificate of Liability Insurance: A One Million Dollar minimum Certificate of Liability Insurance for bodily injury & property damage is required for all events including setup and teardown days.

Will Alcoholic Beverages be Served/Sold? ____ Yes ____ No (If yes, then a Special Event Permit is required from Camden Police Department (page 3). Liquor Liability must be added to Certificate of Liability Insurance and proper licenses obtained from SCDOR. Please see https://dor.sc.gov/tax/abl/licenses for more information.)

Fire Safety Inspection of set-up required from Camden Fire Department (803-425-6040 or 803-600-4870 egardner@camdensc.org)

Security Deposit: $500.00 - Upon acceptance, the lessee is required to make payment of security deposit to hold the date.

Signature ___________________________________________ Date ______/_____/__________
Approved ______ Not Approved __________ Date ______/_____/__________

City of Camden Official Signature ____________________________________________
Camden City Arena Rental Rates & Information

<table>
<thead>
<tr>
<th>Rate</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arena, with access to Catering Kitchen and Conference Room</td>
<td>$1,200.00 daily rental. Rental hours include set-up, breakdown, and clean-up. Nonprofit rental rate of $100.00 per hour with a two hour minimum, not to exceed the daily rental rate. Lessee is responsible for all set-up, breakdown, and clean-up of Arena.</td>
</tr>
<tr>
<td>Conference Room Only</td>
<td>$50.00 per hour with a two hour minimum; $300 full day rental rate. Rental hours include set-up, breakdown, and clean-up the room. Additional fee may apply for use of Catering Kitchen. Lessee is responsible for all set-up, breakdown, and clean-up of room.</td>
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</tbody>
</table>

| Security Deposit | $500.00 |
| Venue Clean Up | $225.00 if required |
| Up to 50 8’x30” Banquet Tables (white) | $100 |
| Event Security | $50.00 per officer per hour if required (beer/wine at event), 4 hour minimum. |

**Security Deposit:**
A refundable security deposit is required for all events. This is not included in the lease amount. A $500 deposit is required. This deposit will be refunded after the Rental Coordinator has inspected the premises and Lessee has complied with Lease Agreement.

**Business License:**
City of Camden Special Events Business License is required for food or product sales. This License must be submitted to Lease Coordinator one month prior to the event.

**Liability Insurance:**
Certificate of Liability Insurance is required for all events and must name the City of Camden as a secondary insured. A One Million Dollar Minimum COL for bodily injury & property damage is required for all events, including setup and breakdown days. COL should be submitted to Rental Coordinator one month prior to the event. If alcohol is served, Liquor Liability must be added to the COL.

**Alcohol:**
A Special Event Permit will be required from the City of Camden Police Department if alcohol is served and/or sold. Liquor Liability must be added to Certificate of Liability Insurance and proper licenses obtained from SCDOR. Please see https://dor.sc.gov/tax/abl/licenses for more information.)

**Fire Safety Inspection:**
A layout of the event is required to be submitted to the Rental Coordinator and City of Camden Fire Marshal or his designee for approval one month prior to the event if the event involves greater than 100 people, tents, food trucks, or is an indoor trade show and exhibition. (803) 425-6040 or (803) 600-4870 egardner@camdensc.org

**Trash:**
Ten trash receptacles and a dumpster are located on the premises. Inside trash barrels will have a liner provided at the start of the event. Additional liners will need to be provided by Lessee.

**Security:**
Security at all events in and on the Leased Premises may be required. Security will be required at the sole discretion of the Lessor. Contact the City of Camden Chief of Police or his designee. 816 W. DeKalb Street, 803-425-6025

The Camden City Arena has a security system to include cameras on site.

**Maximum Capacity:** 1,600
Bleacher Seating Capacity: 600
Conference Room Capacity: 30

**Parking Information:**
Parking is available on the “immediate grounds” of the Arena. This includes the areas outlined in black in the attached photo, comprising approximately 290 parking spaces.
Other adjacent property that may be required for your event is under the jurisdiction of Historic Camden Foundation (HCF). Request to use/rent their property must be coordinated directly with HCF (803)432-9841.

**Items included with rental:**
- WiFi
- 6 6’x30” tables (black)
- 52 meeting chairs (stackable / black)

**Catering Kitchen Amenities**
- Ice Maker
- Stainless Steel Prep Counter/ Sink
- Microwave
- Refrigerator
Parade/Special Events Permit Application

This form must be completed for public events where street closures are required and/or where beer/wine are to be sold or consumed on City property. Please submit requests by mail or e-mail at least sixty (60) days in advance of the event. Requests may be sent by e-mail to kspadacenta@camdensc.org and drabon@camdensc.org or mail to City of Camden, Attn: Kat Spadacenta, 1000 Lyttleton St., Camden, SC 29020.

Date of Application: ____________ Date of Event: ____________
Name of Requestor: __________________________________________
Address: ___________________________________________________
Phone Number(s): __________________________ Email Address: __________________________
Agency/Entity Sponsoring Event: __________________________________________
Agency Contact (if different than above): __________________________
Address: ___________________________________________________
Phone Number(s): __________________________ Email Address: __________________________

Event Name/Type of Event: __________________________________________
Location of Event: __________________________________________
Hours of Event: __________________________________________
Hours of Service of Beer/Wine: __________________________________________
Approximate Number of Event Participants: __________

Road Closure(s) if applicable:

Date(s): __________________________ Start Time: __________ End Time: __________
Requested Closure(s) Please attach illustration of requested closure(s):

Approximate Number of Vehicles or Units Participating: __________________________
Composition and Interval of Space to be Maintained between Units: __________________________