

# Cochrane & District Agricultural Society

PO. Box 897, Cochrane AB T4C 1A9  
Operations Manager ~ 403-932-3250  
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## NORTH GROUNDS ~ FACILITY BOOKING AGREEMENT, POLICY & WAIVER

### CLIENT INFORMATION:

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

Contact Name: \_\_\_\_\_

Company Name or User Group: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Event Name:

Provide your event details including schedule of activities(attach program if available):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# of Riders: \_\_\_\_\_

# of Spectators/Auditors: \_\_\_\_\_

# of Vehicles: \_\_\_\_\_

Booked from (date): \_\_\_\_\_

Arrival Time: \_\_\_\_\_

Booked until (date): \_\_\_\_\_

Exit Time: \_\_\_\_\_

**Times include set up, warm-ups, tear down & clean up.  
You will not have access to grounds before your arrival time.**

### North GROUNDS ~ FACILITY REQUEST:

Outdoor Sand Ring "A"

Outdoor Sand Ring "B"

Cross Country Course

# of Premium Stalls @ barn

# of Outdoor Stalls @ barn

### North GROUNDS ~FEE SCHEDULE:

Ring A Hourly Rate: \$ \_\_\_\_\_ x \_\_\_\_\_ hrs = \$ \_\_\_\_\_

Ring A Full Day Weekday \$ \_\_\_\_\_ x \_\_\_\_\_ days = \$ \_\_\_\_\_

Ring A Full Day FRI-SUN \$ \_\_\_\_\_ x \_\_\_\_\_ days = \$ \_\_\_\_\_

Ring A 3 day Weekend = \$ \_\_\_\_\_

Ring B Hourly Rate: \$ \_\_\_\_\_ x \_\_\_\_\_ hrs = \$ \_\_\_\_\_

Ring B Full Day Weekday \$ \_\_\_\_\_ x \_\_\_\_\_ days = \$ \_\_\_\_\_

Ring B Full Day FRI-SUN \$ \_\_\_\_\_ x \_\_\_\_\_ days = \$ \_\_\_\_\_

Ring B 3 day Weekend = \$ \_\_\_\_\_

Cross Country: \$ \_\_\_\_\_ Per Rider x \_\_\_\_\_ days x # of riders \_\_\_\_\_ = \$ \_\_\_\_\_

Other (please explain) = \$ \_\_\_\_\_

# of Stalls \_\_\_\_\_ x \$ \_\_\_\_\_ per stall x \_\_\_\_\_ days = \$ \_\_\_\_\_

Subtotal: \$ \_\_\_\_\_

GST 5%: \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Rental Deposit (50% of total - booking confirmed when cheque clears) \$ \_\_\_\_\_ (cheque rec'd \_\_\_\_\_)

Refundable Facility Damage/Cleaning Deposit (50% of rental fee) \$ \_\_\_\_\_ (cheque rec'd \_\_\_\_\_)

Refundable Stall Cleaning Deposit (\$25 per stall) \$ \_\_\_\_\_ (cheque rec'd \_\_\_\_\_)

Balance is due 2 weeks before scheduled event: \$ \_\_\_\_\_ (cheque rec'd \_\_\_\_\_)

BALANCE DUE DATE: \_\_\_\_\_

**BALANCE IS DUE 2 WEEKS PRIOR TO SCHEDULED EVENT  
DAMAGE DEPOSIT CHEQUES WILL BE REFUNDED NO LATER THAN 30 DAYS FOLLOWING EVENT.  
FACILITY CHECKLIST MUST BE COMPLETED & SIGNED IN ORDER TO RECEIVE DAMAGE DEPOSIT REFUND**

Bookings WILL NOT be accepted or processed without: 1. Completed signed rental agreement package 2. Completed & signed policies & waiver 3. Payment 4. Damage Deposit 5. Insurance

By signing this agreement you have read, acknowledged & agreed to all fees, terms and policies set out.

Company/User Group/Client Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Printed Name of Signature: \_\_\_\_\_

CDAS Approval: \_\_\_\_\_

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

|                        |       |
|------------------------|-------|
| <b>office use only</b> |       |
| Date deposit recvd:    | _____ |
| Date balance recvd:    | _____ |
| agreement complete:    | _____ |
| waiver complete:       | _____ |

Revised CDAS - April/09