



# C-Side Recreation Center

## Base Cape Cod MWR

### Facility Agreement



Patron Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Unit: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Party Size: \_\_\_\_\_  
 Date/Time: \_\_\_\_\_ Time Food wanted: \_\_\_\_\_ Early Setup: **Y** or **N** Time: \_\_\_\_\_  
 Event P.O.C. (if different from above name): \_\_\_\_\_  
 Function Room \_\_\_\_\_ Pavilion \_\_\_\_\_ Fitness Center \_\_\_\_\_ Party Room \_\_\_\_\_ Bowling \_\_\_\_\_

### I agree to the terms below regarding the following C-Side Facility Event:

**Food and Beverage:** Absolutely NO FOOD can be brought in without prior approval from C-Side Manager. Bringing OUTSIDE ALCOHOL IS NEVER PERMITTED. Pizza and soda can be pre-ordered. If the event falls during normal business hours (Wed – Sat from 4 to 9pm) food/drink can be purchased at the event. If the event is any other time, you MUST pre-order your food and beverage.

**Deposit:** A \$30 cash/check deposit will be required to confirm your event date. This deposit will be refunded if the event is cancelled 72hrs prior to the scheduled date. Event P.O.C. (listed above) or representative is responsible for the cleanliness of the facility and to ensure that the room is left in the same order that it was found. If the facilities are not returned in the same order, then there will a \$35 cleaning fee assessed.

**Base Access:** You are required to secure base access for any non I.D. card holders. Questions on base access can be directed to Access Control @ 508-968-6993.

**Force Majeure:** Unfortunately, there are some circumstances and conditions beyond MWR’s control which would require closure of the Base and/or C Side Recreation Center. MWR will not be held responsible for such events but we will work with you on rescheduling your event on another date, if feasible.

**HOLD HARMLESS:** I agree to reimburse, indemnify, defend and hold harmless the United States of America, the Department of Homeland Security, the Coast Guard, the Coast Guard MWR program, its agents and employees from all claims and causes of action that arise or may arise from my (our) use of the Coast Guard MWR equipment or facilities.

**Room Fees: (may be waived) @ \$25/hr** \$ \_\_\_\_\_  
**Bartenders Fees: @ \$20/hr** \$ \_\_\_\_\_  
**Bowling Party Package: (see back of form)** \$ \_\_\_\_\_  
**Food/Beverages: (see back of form)** \$ \_\_\_\_\_  
**Total Amount Due:** \$ \_\_\_\_\_

**Patron Signature:** \_\_\_\_\_  
**C Side Staff:** \_\_\_\_\_  
**C Side Manager:** \_\_\_\_\_

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

Payment History				
Date	Amount	Method	Notes	Staff Initials

Questions? Contact 508-968-6477

Email completed forms to Mitchell.P.Weathers@uscg.mil or drop off at C Side Recreation Center – 5210 E Hospital Road  
Cash, checks or debit/credit card. Checks payable to MWR.

