

## Permit Contract

**Memorial Sports Centre - Fort Frances**

740 Scott Street  
 Fort Frances, ON P9A 1H8  
 Phone: (807) 274-4561  
 FAX: (807) 274-3799  
 Email: sports@fort-frances.com

**Permit #1675, Approved**

Jun 11, 2018 3:51 PM

Brian Angus  
 218-36, RR2  
 Fort Frances, ON P9A 3M3  
 Email: bwangus@bell.net



Customer Type: General Public

Prepared By: Jason Kabel

Customer ID: 2542

Home: (807) 274-6057

Charges	Taxes	Discounts	Total Charges	Deposits	Deposit Taxes	Total Payments	Refunds	Balance
\$583.40	\$75.84	\$0	\$659.24	\$0	\$0	\$0	\$0	\$659.24

## ▼ RESERVATIONS

Event		Resource		Center		Notes
Watten Fire Department Annual Fish Fry Type: Event Attend/Qty: 199		Kiwanis Sunny Cove Camp		Kiwanis Sunny Cove Camp 960 Hwy 11 Fort Frances, ON P9A 3M3 (807) 274-4561		--
Days Requested		Event Begins	Duration	Event Ends		
Day	Date			Date	Time	
Friday	Aug 24, 2018	9:00 AM	13 hours	Aug 24, 2018	10:00 PM	
Summary					Notes	
Total Number of Dates: 1					--	
Total Time: 13 hours						

## ▼ CHARGES

Description	Event / Resource	Unit Fee	Units	Tax	Charge
SCCamp Meeting Full Day10-160-1614-0430-40774	Watten Fire Department Annual Fish Fry #1675 Kiwanis Sunny Cove Camp	\$583.40	1.00	HST: \$75.84	\$659.24

## ▼ Payment Schedule for Original Balance of \$659.24

Due Date	Amount Due	Amount Paid	Withdrawal Adjustment	Balance
Aug 24, 2018	\$659.24	\$0	\$0	\$659.24
			<b>Current Balance</b>	<b>\$659.24</b>

## ▼ WAIVERS

**Facilities Waiver**

Due Date: Aug 24, 2018

**General Waiver When Renting All Facilities**

I understand that I am responsible for my group and/or parties actions and conduct during my reservation. My current and future reservation requests may be cancelled if the following should occur: Fighting; Unseemly conduct; Health Violations (spitting, smoking, etc.) abuse of staff or property. Full payment is required at the time of the booking. I must provide at least two weeks notice of cancellation of my booking. If cancelled prior to two weeks I will receive a refund minus 10% of total. After the two week deadline a refund will NOT be issued. Regular contract users will not be subject to the 10% surcharge. Contract changes/cancellations will only be accepted from the individual originally booking the facility(s). My group will assume responsibility for providing adequate supervision, facility cleanliness and general order while using the facility. Damage and/or destruction of the above named properties will result in repair and/or replacement fees billed directly to me. In all circumstances, the Town of Fort Frances retains full authority for final approval and denial of facility reservation request.

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

**TOFF Alcohol Policy**

Due Date: Aug 24, 2018

I have read and agree to abide by the terms and conditions of the Town of Fort Frances Alcohol Policy.

TOFF Alcohol Policy

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

**TOFF Smoking Policy**

Due Date: Aug 24, 2018

I have read and agree to abide by the terms and conditions of the Town of Fort Frances Smoking Policy.

TOFF Smoking Policy

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

**TOFF Facility Rental Policy**

Due Date: Aug 24, 2018

I have read and agree to abide by the terms and conditions of the Town of Fort Frances Facility Rental Policy.

TOFF Facility Rental Policy

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