

A. EVENT INFORMATION

EVENT ORGANIZER AGREEMENT

LIQUOR LICENSED EVENTS

EVEN	IT NAME		RENTAL#					AL#					ATTE	NDANCE	E	
LOCATION EVEN			NT DATE LIABIL				ILITY INSURANCE POLICY # (if applicable)									
M			MM / DD / YY				,									
SPECIAL OCCASION PERMIT # EVEN			ENT START TIME ALO				ALCOHOL END TIME EVENT				T END	END TIME				
EVENT ORGANIZER'S NAME (PERSON AND/OR GROUP SPONSORING EVENT)			PHONE NUMBER						E-Mail Address							
NAME OF DESIGNATE (IF APPLICABLE)			PHONE NUMBER						E-Mail Address							
NAME OF DESIGNATE (IF APPLICABLE)			PHONE NUMBER						E-Mail Address							
Will any persons under nineteen (19) years of age be in attenda							Yes	es 🔲 No								
	EVENT WORKERS (proof of Smart Serve® certification <u>must</u> be subtended to the substitution of the substi	mitted)														
THE STREET HOLDER TO BE OBED FOR EVERY WORKERO (I.C. Dauge of Commy																
#	EVENT WORKER'S NAME OR SECURITY WORKER'S NAME	SMART SERVE® CERTIFICATION # OR SECURITY LICENCE #														
1.	EVENT ORGANIZER															
2.	DESIGNATE															
3.	SECURITY WORKER															
4.																
5.																
6.																
7.																
8.																
9.																
10.																
11.																
12.																
13.																
14.																
15.																

If additional space is required to identify more Event Workers and/or Security Workers, please attach a complete list of names and certification numbers.



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ADDITIONAL TERMS AND CONDITIONS

As the Event Organizer:

- 1. I have read the Municipal Alcohol Policy and Procedures and understand the information and requirements contained within. I understand that it is my responsibility to contact the Town of Caledon to seek clarification should it be required and, I acknowledge the following terms as conditions of my rental.
- 2. I will supply the Town of Caledon with a copy of the Special Occasion Permit (herein referred to as SOP) or Liquor Licence (if using a Caterer's Endorsement).
- 3. I agree to satisfy the liability insurance requirements applicable, as set out in the Municipal Alcohol Policy and Procedures.
- 4. I agree to adhere to the conditions of the Municipal Alcohol Policy and Procedures and the Liquor Licence Act, R.S.O. 1990 c. L. 19 (the "Liquor Licence Act").
- 5. I agree not to hold the Town of Caledon responsible for any costs or losses incurred if it is deemed necessary to close down the event due to an infraction of the Municipal Alcohol Policy and Procedures or SOP.
- 6. I understand that I can be held liable for injuries and damages arising from failing to adhere to the *Liquor Licence Act* or from otherwise failing to take action that will prevent foreseeable harm from occurring to the participants, goods (equipment/facilities/etc.), or members of the general public.
- 7. I agree to be responsible for any charges against me for infractions under the *Liquor Licence Act* or other relevant legislation as levied by Ontario Provincial Police or an Alcohol and Gaming Commission of Ontario Inspector.
- 8. I understand that if an infraction of the Municipal Alcohol Policy and Procedures. occurs, the Town of Caledon, Ontario Provincial Police and/or the Alcohol and Gaming Commission of Ontario may take the following steps:
 - i. Close the event at the time of the infraction; and/or
 - ii. Suspend or refuse from further use of Town of Caledon facilities.

Event Organizer/Designate's Name	Event Organizer/Designate's Signature	Date
FOR OFFICE USE ONLY		
Agreement Received By: Signature of Town of	Caledon Representative Date Received:	