

# PUTNAM COUNTY BOARD OF COMMISSIONERS



117 Putnam Drive, Suite A ♦ Eatonton, GA 31024  
 706-485-5826 ♦ 706-923-2345 fax ♦ www.putnamcountyga.us

## RENTAL FACILITIES

### Community Centers/Parks/Pool

	Mezzanine Area	Meeting Room	Gym Only	Tennis Courts	Athletic Fields	Pavilions
	Fee	Fee	Fee	Fee	Fee	Fee
Poole Recreation Center	\$45.00 + \$15.00/hr for staff *	\$35.00/hr + \$15.00/hr for staff *	\$50.00/hr + \$15.00/hr for staff *	\$20.00/hr + \$15.00/hr for staff *	\$40.00/hr (\$15.00/hr for lights) -per field	N/C
Jimmy Davis Park	<b>Large Room</b> \$55.00/hour + \$15.00/hr for staff *	<b>Small Room</b> \$35.00/hour + \$15.00/hr for staff * --	--	--	\$40.00/hr + (\$15.00/hr for lights) - \$15.00/hr for staff *	\$20.00/hr \$15.00/hr for staff *
Marion Street Swimming Pool**	\$100.00** + \$15.00/hr for staff *	--	--	--	--	--
Willard Park	--	--	--	\$20.00/hr + \$15.00/hr for staff *	--	N/C

**All Prices are per hour except for the pool.**

**All Field prices are for 1 field. You will still need the \$15 staff fee.**

**We do offer a non-profit rate.**

**\*Supervision**

All functions (except pavilion rentals) must have a department-employed superintendent on duty for the entire length of the rental. The employee will be present and close up at the conclusion of the event. In the event of any electrical, mechanical, or plumbing problems, it is in the best interest of the Recreation Department and renter to have this representative on duty. The normal working hours for the staff are Monday through Thursday, 8:00 am through 5:00 pm and Saturday 10:00am through 2:00pm. Any time that is not normal working hours shall be the responsibility of the renting party at a cost of \$15.00 per hour.

**\*\*Marion Street Swimming Pool**

The fee is \$100 for 0 to 50 people through the gate, and \$150 for 51 through 100 people through the gate. This is for Friday and Saturday from 6:00pm to 8:00pm only. Weather permitted! There is a \$15 staff fee per hour.

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## RECREATION DEPARTMENT



140 Recreation Road ♦ Eatonton, GA 31024  
Tel: 706-485-8565 ♦ Fax: 706-485-0856 ♦ [www.putnamgarec.com](http://www.putnamgarec.com)

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### FACILITY RENTAL CONTRACT

(PLEASE PRINT NEATLY):

Facility Reserved: \_\_\_\_\_

Date For Facility Use: \_\_\_\_\_

Beginning Time: \_\_\_\_\_ Ending Time: \_\_\_\_\_ Total # of hours: \_\_\_\_\_

Organization/Group (if applicable): \_\_\_\_\_

Name (Responsible For Event): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax or Cell #: \_\_\_\_\_

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

Event/Activity: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total fee due for rental \$ \_\_\_\_\_

By my signature, I have read and understand the General Rental Guidelines. I agree that I will use the facility only for the times and date specified. I understand that if any of these regulations are not followed, I may be charged an additional fee and may not be allowed to use the facility again in the future.

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

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FOR PCRD OFFICE USE ONLY

#### Payment Information:

Cash  Credit Card  Check/MO/Cashier's Check # \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ Date: \_\_\_\_\_