MOFFAT COUNTY FACILITIES REQUEST FORM
SECURITY ASSESSMENT FORM

Please check the following boxes that apply for your request to use a County facility;

1). Reason for facility rental:

- ☐ Birthday Party
  - ☐ Youth under (13 yoa)
  - ☐ Teenage (13-18 yoa)
  - ☐ Adult (over 18 yoa)
- ☐ Picnic
- ☐ Wedding/Reception
- ☐ Dance
- ☐ Band or D.J.
- ☐ Other: _____ Maximum # of people attending: _____
  Purpose

2).Alcohol Use:

- ☐ Are you providing alcohol to people attending?
- ☐ Will alcohol be allowed into the facility from people attending?
- ☐ Will alcohol be sold at the facility during your event?

3). Are you charging admission to your event:

- ☐ Yes
- ☐ No

4). Are you asking for donations for your event?

- ☐ Yes
- ☐ No

5). Exact times your event is open to public:

Start: _____ End: _____ Date: _____

6). Do you understand that if the facilities are damaged from your event, you are responsible for payment of the damages in full, or if law enforcement has to respond to your event when no security is provided, you will lose your security deposit?

- ☐ Yes
- ☐ No

7). Even if it is deemed no security is necessary for your event, The Moffat County Sheriff's Office may still conduct a walk through of the facility during the course of the event. Do you understand that any deviation from the information you have provided on this form, the boxes you have marked, may result in the termination of your event and forfeiture of your security deposit?

- Yes ☐
- No ☐

8). Drivers license # (attach copy) _____

_____ _____

Signature of Responsible Person Date County Signature Date

The Sheriff's Office requires security for this event Yes ☐ No ☐ _____

Sheriff's Office Signature / Date