

Fort Bend County Parks and Recreation Community Use Request Form

COMMUNITY USE CRITERIA

Tax Exempt Entities which serve Fort Bend resident communities and can provide copies of their active 501(c)(3) taxexempt designations are eligible to schedule and use community rooms and pavilions with use fees waived. Use shall be, up to a maximum of one use per month, during regular rental hours (Monday–Friday from 8:00 a.m. to 4:00 p.m.).

Schedules are subject to availability and management approval. Events/meetings must be booked at least 30 days out, and no more than 12 months out. Should significant set up be required, the County may require the entity requesting use to provide assistance necessary for room set up at the entity's own cost. The Authorized Representative for the entity must complete the FACILITY USE AGREEMENT & GUIDELINES prior to the Approval and must ensure that the event/meeting does not allow for more than 50 attendees.

Requests must be submitted by use of this Community Use Request Form, and will be reviewed/approved before any reservations are made. Staff will make every effort to notify applicant within five (5) business days of the determination, whether or not the request can be honored, and will follow-up with the appropriate rental documents. Questions regarding community Use Requests should be directed to the Parks Director at (832) 471-2583. Exceptions to the Community Use Criteria shall only be made by a waiver approved by Commissioners Court.

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Entity requesting facility use: <u>FUS NCAV NEGLONAL (NAMBER)</u>
Authorized Representative Name, Title: Don McCoy, CEO
Term of Office (if applicable):
Contact Information (Phone, Email Address):
Organization Mailing Address: P.O. Box 386 Fulshcar 1744
Secondary Contact Name, Title: Rachel Durhant, V. P.
Is your organization a federally-designated 501(c)(3)? 501(c)(b)
If so, please attach a copy of your designation certificate with this request
What is your organization's purpose? Leves as a Resource for local his in softe Community
Do you provide direct services to the citizens of the County, and if so, what are they?
Has your entity used County Parks facilities previously, and if so, when and for what sorts of functions? July 4, 2024 - Liberty on the Brazos Public Event

Complete usage request chart on following page

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Date & Times Requested	Type of Function	Recurring? If so,	Est. # Attending	Room Preference & Equipment Required	Room Booked	Firmed-up
		frequency?			Tentatively	
1.07.04.3025	Public Event	No	5K	Bus Office Blog & Stage	<u>,</u>	<u> </u>
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Staff Use Only:

Approvals:	
X:	Date:
X:	Date:
Reservation agreement sent to client:	Date:

Form Approved by Commissioners Court on:



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Tildhan Daningal Chanabar

Entity requesting facility use: TUSNOW REGIONOU CHAMICO
Authorized Representative Name, Title: Don McCoy CEO
Term of Office (if applicable):
Contact Information (Phone, Email Address):
Organization Mailing Address: P.O. Box 386 Fulshcar 77441
Secondary Contact Name, Title: Kadul Durkan, Y.P.
Is your organization a federally-designated 501(c)(3)? 50(c)(u)
What is your organization's purpose? Survey a resource for local business the Community
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