

In addition to the policies and rules set forth in the *Facility Reservation Guide and Policies*, the following requirements apply to youth events:

- A minimum of one chaperone (20 years or older) is required. For events with more than 25 attendees/guests/participants between the ages of 15-19, an additional chaperone (20 years or older) is required for every twenty-five (25) attendees/guests/participants between the ages of 15-19. All required chaperones must be present on-site at all times during the event.
- A guest list must be provided to the Division at least two weeks before the event date. The guest list must include the names of the attendees/guests/participants between the ages of 15-19 and chaperones.
- Only guests identified on the guest list provided to the Henrico County's Division of Recreation and Parks may enter. Individuals not on the provided guest list are not permitted to enter.
- Event times must be pre-determined and submitted 30 days before the event date.
- The presence of two off-duty Henrico Police officers is required for events for youth. Applicants are assessed a minimum fee of \$400 for the service, which includes three hours of coverage during the event, as well as ½ hour both before and after the submitted and approved event time. Fees for additional hours of police coverage as required will be assessed at a flat rate of \$100 fee per hour.
- The established room capacity may not be exceeded.
- The applicant is responsible for the conduct and behavior of all attendees/guests/participants.
- The applicant must cooperate with and abide by lawful orders and requests from authorized Henrico County personnel.

I have read the foregoing requirements for youth events, and I agree to comply with the requirements in this document and the policies and rules set forth in the *Facility Reservation Guide and Policies*. I understand and acknowledge that I am responsible for supervising the event identified below and the attendees/guests/participants of such event.

Event Date: _____

Event Set-up Time: _____ Event Time: _____ Event Clean-Up Time: _____

Facility Name: _____

Specific Room(s) Requested: _____

Nature of Event: _____ (Age of birthday & graduation events is required)

Signature: _____ **Date:** _____

OFFICE USE ONLY

Date Submitted for Police Request: _____

Facility Coordinator Signature: _____ Date: _____