

## **Alcohol Risk Management Policy Agreement Form for Special Occasion Renter and Permit Holder**

1. I have received and reviewed a copy of the Alcohol Risk Management Policy.
2. I understand that I must adhere to the conditions of the Alcohol Risk Management Policy and the Liquor Licence Act of Ontario.
3. I understand that if I, or other individuals at the event, fail to adhere to the Alcohol Risk Management Policy, the Township of Springwater staff designates may take the appropriate action. This action may include immediate cancellation of the Rental Agreement, stoppage of the event, suspension from using the facility for a period of up to three (3) years and / or the notification of local authorities.
4. I understand I can be held liable for injuries and damages regarding the operation of the event.
5. I understand and acknowledge that I must refrain from consuming alcohol while the event is in progress and must not be under the influence of any alcohol consumed before the event.
6. I have completed the Municipal Clearance Form (outdoor events only).

| <b>Item</b>  | <b>Fill In the Area Below</b> |
|--|-------------------------------|
| Renter Name (Please Print):                                  |                               |
| Renter Signature:  |                               |
| Date:  |                               |
| Permit Holder Name (if different from Renter, please print): |                               |
| Permit Holder Signature:                                     |                               |
| Date:  |                               |