Location: Fannin County Multi-Purpose Complex \_\_\_\_\_\_

 Roy V Floyd Community Center \_\_\_\_\_\_

 Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Event: \_\_\_\_\_\_\_\_\_\_ Hours of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person Responsible for Event/Payment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will there be alcohol at this event? \_\_\_\_ YES \_\_\_\_ NO

***No alcoholic beverage may be consumed after 1:15 AM on Sunday or 12:15 AM on any other day.* Texas Alcoholic Beverage Code Section 105.06 (b).**

When alcohol is present at an event, a minimum of four (4) uniformed officers is required at the rate of **$50.00** per hour/per officer *(****Minimum 4 hours****)*.Payment is due upon officer’s arrival. **When officers arrive at the event and determine that alcohol has been consumed prior to their arrival an additional hour will be charged, per officer. Refusal to pay the additional cost may be cause to immediately end the event.**

***A cash deposit of one-half of the total amount is required at the time of this agreement, and the remainder will be paid, in cash, at the event.******If the event is cancelled the deposit is non-refundable unless the police department receives notice at least 5 days prior to cancellation.***

No. of Officers \_\_\_\_ Event Security Hours: \_\_\_\_ Amount due: $\_\_\_\_\_\_\_\_\_

The Bonham Police Department reserves the right to determine the number of officers necessary for any event, even when alcoholic beverages are not present.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to the terms and conditions of this agreement, including the number of officers, hours of security, rate of payment in cash to the officers and the non-refundable deposit.

I further understand that if there is any type of disturbance at the event the officers have the discretion to end the event; and that I am still responsible for paying the officers the amount due.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name of person responsible for the event and payment

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of person responsible for the event and payment Date