

Pavilion Rental Checklist

Each Pavilion is limited to a party of 200

Thank you, for considering Bellows AFS for your special event!

Compliance with this checklist is required to ensure the safety of all guests and staff at Bellows AFS.

Each of the four sections MUST BE SIGNED to complete your reservation.

Failure to comply may result in a forfeit of your reservation and/or cancellation of your event.

For more information, please contact the Services Superintendent at 808.259.4210 or 808.690.0297

GUEST PROCEDURES

All non-military ID card holders must be sponsored onto the installation by an authorized card holder. For further information please refer to the Security Forces section on our website at www.bellowsafs.com, contact the Security Law Enforcement Desk at (808) 259-4200, or email det218fss.sf@hickam.af.mil.

Vehicles entering Bellows AFS must be ready to present the following to the Gate Guard

- ✓ Current driver's license
- ✓ Current vehicle registration
- ✓ Current vehicle safety inspection
- ✓ Current proof of insurance

Section 1

EXPECTED NUMBER OF GUESTS

The total number of EXPECTED GUESTS for this event must be submitted no later than 5 days prior to the event.

In the event that the number of guests exceed the number of guests expected, this will be grounds for eviction, in addition, a forfeit of any payments made to Bellows AFS for this event.

Reservations Dept. Signature _____ **Date** _____

Section 2

LIFEGUARDS

*Parties of 100 or more must provide additional lifeguard service. A minimum of one certified lifeguard per 100 people must be provided. Lifeguards must check in at Lifeguard Tower 2 30 minutes prior to the start of the event. All lifeguards must be present and on the beach at all times. All certifications must be mailed or faxed (808) 259-4125, to the Lifeguard Supervisor no later than 72 hours prior to the date of the event. **"All certifications with valid picture ID"***

Please contact the Lifeguard Supervisor at 808. 306-0075 or 808.259-4129, for more information.

Lifeguard Dept. Signature _____ **Date** _____

Section 3

SANI-TOILETS

Parties of 200 or more will be charged a fee of \$140 per sani-toilet.

(One sani-toilet per every 100 additional people)

Please contact the ODR Director at 808.259-4128 or 808.306-6238 for more information.

ODR Signature _____ **Date** _____

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Section 4

PARKING PLAN

Over 300 attendees: Pavilion parking lot will be blocked at the inbound lane of Beach Walk Lane during the event. Sponsor will sign out stanchions/cones to block entrance to the pavilion parking area. Overflow parking will be utilized (refer to Bellows map).

Less than 299 attendees: Pavilion parking lot will be on a first come first serve basis. When the parking lot is full the inbound lane of Beach Walk Lane will be blocked with stanchions/cones.

NOTE: Parking in front of reservations building, and mini golf course are prohibited for special event attendees. Only handicapped personnel, distinguished visitors, and delivery/contracted services will be allowed access to the pavilion parking area when the parking lot is closed for parties over 300 personnel. Additionally events with over 350 DOD personnel will be required to complete a mass gathering event request. Sponsors with events over 100 personnel must report to Bldg. 515 at least 1 hr before the start of the event and contact the on duty flight sergeant for clarification of all instructions. Also, the sponsor will sign out stanchions/cones to block entrance to beach walk lane in the event the parking lot becomes full.

Please contact Security Forces Operations at (808) 259-4204 between the hours of 0730-1630, to establish a parking plan at least 14 days prior to the function and receive a copy of the Special Event/Overflow Parking Plan.

Parking attendants must check in at the Law Enforcement Desk (Building 515) one (1) hour prior to the start of the event.

 SF's Operations Certifying Official _____ Date _____

SPONSOR INFORMATION

I have read and understand the foregoing policies. In addition, I understand that failure to comply fully with these requirements, may lead to eviction with or debarment with no refund and possible action under the UCMJ.

Sponsor's Name (Printed) _____

Sponsor's Signature _____ Date _____

Organizational/ Home Address _____

Phone Number _____ FAX _____ Duty Ph. _____

Email Address _____

SECONDARY POINT OF CONTACT

Name (Printed) _____

Email _____ Phone _____

FAX _____ Duty Phone _____