

United Presbyterian Church of Albany
Facilities Use Agreement

Organizations Name: _____

Organization's Officer or Person in Charge: _____

Address: _____

City: _____ State: _____ Zip : _____

Telephone (day) _____ (evening) _____

Date requested _____

Arrival Time: _____ Departure Time: _____

Room	Rate	Amount
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_____	_____	_____
_____	_____	_____

TOTAL: _____

Deposit Fee \$100

Equipment Requested: _____

Equipment Fee _____

Total Rental Fees and Deposits _____

Discounts Non Profit 15% _____

Grand Total _____

Note: Special arrangements, etc _____

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Liability Waiver and Hold Harmless Agreement

The rental group shall hold the United Presbyterian Church of Albany harmless from, defend and indemnify it against any claims, loss damages, liability, expenses, actions, suits, or judgments, including costs and reasonable attorney fees, for damage to any property or injury, illness or death of any person arising from or relating to the performance or failure to perform obligations hereunder by the United Presbyterian Church of Albany or any person employed or finished by or throughout the United Presbyterian Church of Albany. The foregoing indemnity and hold harmless obligation of the United Presbyterian Church of Albany includes and applies without limitation to injury or damage to the rental group and third parties, regardless of how such injury or damage may be caused or suffered. The provision of this section shall survive the termination of the rental agreement with respect to any damage, injury illness, or death occurring prior to such termination.

I have read, understand, and agree to all terms and conditions outlined in the Liability Waiver:

Applicant signature

Date

Print name:

RULES AND RESPONSIBILITIES

I have received, read, understand, and agree to all terms and conditions as outlined in the "Rules Governing Use of the Facilities" as set forth by United Presbyterian of Albany. I am of legal age and will be personally responsible for the repair of damage to equipment and/or facilities and for the replacement of missing property

Applicant signature

Date

Print name:

Total Rental Charge _____ Due in Full by _____

Deposit Amount _____ received by _____ date _____

Note: Deposit amount will be refunded if there is no damage or loss to facility or equipment

The use of the facility must abide by Christian values. Profanity, sexual misconduct, harassment, discrimination will not be allowed.