

USE OF FACILITIES AGREEMENT

Incorporating a Release, Waiver of Liability, and Indemnity Agreement

This use of facilities agreement is between The Leipsic Community C 120 E. Main St. Leipsic, OH 45856("Premises") and rental of the [Name of building/	renter, an Ohio nonprofit corporation ("Center") whose address is, ("User") The agreement provides for room] ("Facility") on (date).			
IN CONSIDERATION of being permitted to utilize the Facility as ind for itself and all its employees, agents, representatives and assignees evaluate the Premises and Facility. It is further warranted that use of Facility, and all equipment therein have been inspected and carefully and reasonably sited for the purpose use or participation.	s, agrees and represents that it has or will inspect and carefully f the Facility constitutes an acknowledgement that the Premises.			
IN FURTHER CONSIDERATION OF BEING PERMITED TO ENT THIS AGEEMENT INCLUDING BUT NOT LIMITED TO EVALUA- HEREBY AGREES TO THE FOLLOWING:	TER THE CENTER FOR ANY PURPOSE CONSISTENT WITH ATION OR USE OF FACILITY OR EQUIPMENT, THE USER			
officers, employees, volunteers, independent contractors, an personal representatives, assigns, heirs, and next of kin for any of injury to person or property or resulting in death of the Use while the User or its employees, clients, agents, or represent Facility or equipment therein. 2. THE USER HEREBY AGREES TO INDEMNIFY, DEFEND from any loss, liability, damage, or cost that may incur arising not limited to the use of the Center's equipment or Facility, I fault of the Center. 3. THE USER HEREBY ASSUMES FULL RESPONSIBILI PROPERTY DAMAGE that may be incurred arising from the limited to use of the Center's equipment or Facility, regardless Center. THE USER further expressly agrees that the forgoing	ES AND COVENANTS NOT TO SUE the Center, its directors, and agents from all liability to the User, its employees, agents, y loss or damage, and any claim or demands therefore on account ers whether caused by the negligence of the Center or otherwise tatives are in, upon, or about the Premises including use of any D, SAVE, AND HOLD HARMLESS the Center and each of them from the User's operations at the Center premises, including but regardless of whether such harm is caused by the sole or partial TY FOR AND RISK OF BODILY INJURY, DEATH, OR the User's operations at the Center Premises, including but not as of whether such harm is due to the sole or partial fault of the grelease, Waiver and Indemnity Agreement is law of the State of Ohio and that if any portion thereof is held tinue in full legal force and effect.			
IT IS FURTHER MUTUALLY AGREED between the parties that:				
 The User shall not violate any city, county, or state law in or a The User shall not assign this agreement without written conse Either party may terminate this agreement at any time by givin This agreement is the product of joint negotiation and drafting the basis that the party drafted the language in question. 	ent of the Center.			
THE USER HAS READ AND VOLUNTARILY SIGNS THIS USE OF RELEASE AND WAIVER OF LIABILITY AND INDEMNITY ACSTALL STATEMENT, or inducement inconsistent with the foregoing written agrees	GREEMENT, and further agrees that no oral representations.			
The Leipsic Community Center Staff Representative Signature	Renter's Signature			
	Renter's Address			

Date Signed

Date Signed



FACILITY USE POLICIES

Thank you for choosing The Leipsic Community Center for your event!

Parking:

- Please park along the street or in side lots that are not being used for business parking.
- Please follow all posted signs

Rental Procedures:

- The Leipsic Community Center (the "Center") is a family-based facility. All activities and behaviors of any persons or groups renting the facility must adhere to the Center's principles and morals.
- Upon arrival you will find the area you rented clean and ready for your use. A staff person will check in with you during your stay. If you need anything in the meantime, please contact the staff member located at the front desk.
- Set up and tear down of the tables and chairs is the responsibility of you and your group.
- Clean-up of the area you rented is the responsibility of you and your group. Please clean and return the tables and chairs. Please place all trash in the receptacles located in the rooms being used for the rental. Deposit will not be returned if the area is not cleaned immediately after the event is over.
- Entertainment activities must be approved in advance including, but not limited to bands, DJs, inflatables, caterers, etc.
- Opportunity Center, Leipsic Museum, and Youth Center may not be rented.

Advise Your Guests:

- For safety reasons, please: No glass containers permitted in the teen center.
- Alcohol, illegal drugs and substances, firearms, and fireworks are prohibited.
- The Center is not responsible for personal belongings, valuables, and other property. Please take appropriate measures to secure
 your belongings.

Facility Needed (Circle one): * Ca	afé Kite	chen	Gym	Meeting/	Opportunity Room (#)
*If, on the day of your event, it is deter and charged the difference in rental fee	mined that your gues. If no room is ava	iests have ex ailable, your	ceeded the cap deposit will n	pacity listed, yo ot be refunded.	ou will be moved to a lar	ger room
Date Facility Needed:	Ti	ime Facility 1	Veeded:			
Is the event being catered (Yes or No) If yes, by who:			Phone# Caterer:			
Total number of guests expected:seating for more is needed, we have l	ists of places when	Please keep re you can ro	in mind we hent these item	nave seating fo	r 300 people in the gym	. If
Total Cost (must be paid in full in or	der to secure rese	rvation):	() Check	() Cash	
**If reservation is cancelled at least one month deposit will not be returned. Any cancellation	h before event, your to occurring less than tw	otal amount will o weeks before	be returned to the event, NO F	you. If cancellatio UNDS WILL BE	n occurs from 2-3 weeks prio RETURNED. **	or, your
I have read this policy and agree to c	omply with the gu	idelines as s	tated:			
Renter Name (Printed)	me (Printed)		Phone (cell)		(Home)	
Renter Address	C	City, State		Zip		
Renter Name (Signature)			Date			
The Leipsic Community Center Staff Ro	epresentative		Date			

Please let us know if you have any questions or concerns:419-943-7400 or <u>director@theleipsiccenter.org</u>. Thank you again for choosing to hold your event at The Leipsic Community Center!