

North Whitehall Township

REQUEST FOR USE OF TRAINING ROOM

(Must be submitted two weeks in advance of event. Use back for additional explanations.)

Organization Name (If Applicable): _____

Point of Contact (ON-SITE DURING EVENT): _____

Cell Number: _____ Email: _____

Event Title: _____ Event Date(s): _____

Event Start Time: _____ Event End Time: _____

Estimated # of Attendees (Max 50): _____

Food: will be served. will not be served.

Event Description: _____

Technical Support will be needed? Yes No Explain: _____

***Applicant must Sign Below & Sign the Rules and Regulations Agreement on Back.**

Applicant Name (Printed): _____

Applicant Signature: _____ Date: _____

COMPLETION/SUBMISSION OF THIS APPLICATION DOES NOT APPROVE YOUR EVENT.

FOR OFFICE USE ONLY

Application Approved by: _____ Date: _____
(Recreation & Communication Coordinator)

Application Approved by: _____ Date: _____
(Township Manager)

Rules and Regulations of Facility Use Agreement

1. The NWT Training Room is available to rent Monday through Thursday from 8:00am to 4:00pm.
2. Weekend and evening hours are only available if approved by the Township Manager for a township-related function.
3. Fee Agreement: A rental fee of \$150 (half day) or \$300 (Full day) will be paid prior to use.
4. Non-Fee Agreement: No fee is required for this usage.
5. The User is financially responsible for any incidental, indirect, special, or consequential damages arising out of User's use of the above-described premises.
6. User agrees that it will not use the premises for any unlawful purposes, and will obey all laws, rules, and regulations while using the facility.
7. User agrees that it will not use the premises for any purpose that is contrary to the approved event description.
8. User agrees that it is solely responsible to implement appropriate screening and supervision procedures to protect children, youth, and vulnerable adults attending user's function at the above-described facility.
9. User agrees to be responsible for preparing for use and returning to the pre-use condition all areas of the premises which User will use.
10. User agrees to conduct a visual inspection of premises, including entrances and exits, prior to each use, and warrants that the facility will be used only if it is in a safe condition.
11. User agrees that it will not assign any of its rights under this agreement, and any such assignment will void this agreement.
12. User must secure liability insurance with a minimum liability occurrence limit of \$1,000,000. The User will provide a certificate of insurance to NWT at least seven days prior to the date upon which the User begins to use the facility. The certificate of insurance will indicate that User has made North Whitehall Township an "additional insured" on User's policy.
 - a. Individual Users. In lieu of providing liability insurance, users may obtain signed Activity Participation Waiver Agreements (either provided by or acceptable to NWT) from each participant in the activity. If the participants are minors, User will obtain the signature of at least one parent or legal guardian on each Activity Participation Waiver Agreement
13. I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE North Whitehall Township, its officers, agents, employees, volunteers and assigns, from and against any and all losses, liability, claims, demands, damages, actions and causes of actions, and expenses including reasonable attorneys' fees, judgments, and amounts, whatsoever arising from or related to any loss, damage or injury, including death, that may I may sustain, or to any property belonging to I, while participating in physical activity, or while on or upon the premises where the activity is being conducted.
14. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OR LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, INCLUDING DEATH, that I sustain, or loss or damage to property owned by me, while using the North Whitehall Township facility.
15. This agreement may be cancelled by NWT at any time.

Applicant Signature: _____ Print Name: _____ Date: _____

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