



**FACILITY USE AGREEMENT
 (COMMERCIAL ORGANIZATIONS)**

Applicant's Name: _____ Date: _____

Applicant's Address: _____ City: _____ Zip Code: _____

Phone: Home _____ Business _____ Cell _____

Type of Activity: _____

Facilities Used by: _____

Area(s) or Room(s) Requested: _____

Month(s)	Year(s)	Date(s) Requested	Time(s) Requested	
			From	To

TO BE COMPLETED BY SCHOOL

Facility	Rental Fee Per Hour	Hours	TOTAL	Security Deposit
			\$	\$
			\$	\$
			\$	\$
Personnel Required	Staff Charge Per Hour	Hours	TOTAL	[REDACTED]
			\$	
			\$	
			\$	
Equipment	Describe:		\$	
TOTAL CHARGE for use of facilities as described above:			\$	\$
TOTAL CHARGE FOR ACTUAL USE OF FACILITIES			\$	\$

As users of the school facilities, we assume all responsibility for the activity and will not violate any city, county or state law. We understand and agree to comply with all use policies of the school. Any loss or damages to buildings, equipment or grounds as a result of this activity will be fully reimbursed. We hereby acknowledge having received, read, and agree to abide by the school's use policies. We acknowledge that the school may terminate this agreement at any time.

Applicant shall indemnify and defend the school and its affiliates, and their officers, directors, and employees and agents, from and against any and all costs, losses, damages and liabilities (including, without limitation, reasonable attorneys, fees, interest and any penalties) incurred or suffered by the school or any of its affiliates (or any of their officers, directors, or employees) with respect to, in connection with or arising out of applicant's use of the school's facilities.

(Check if Applicable)

\$1,000,000.00 ACTIVE LIABILITY insurance is required by all applicants using the facility for commercial purposes. This use qualifies as a commercial purpose and a certificate of insurance naming the school as an additional insured shall be attached to this agreement.

You are hereby granted this PERMIT to use the school's facilities as described above. Use at your own risk. The school is immune from liability for your use pursuant to UCA § 53G-7-209 and -210 and § 63G-7-301(5). You are advised to obtain insurance for your own liability.

Signature of Applicant: _____

Signature of School Personnel: _____