

LISBURN FIRE COMPANY KITCHEN USE AGREEMENT

(Please Print All Requested Information)

Organization (opt.):	<i>Please submit a copy of your liability insurance coverage.</i>	
Primary Contact:		
Mailing Address:		
Phone (Home):	(Cell):	(Other):
E-mail address:		
Secondary Contact:		
Mailing Address:		
Phone (Home):	(Cell):	(Other):
E-mail address:		

EVENT INFORMATION:

Planned Event		Fundraiser: N or Y
Requested Date:		
Kitchen Staff-Opening Time:		Kitchen Staff-Closing Time
4 Hour Minimum: ** Kitchen Fees for each hour over the minimum will be \$25/hr, if more than 1 Volunteer is needed that would be \$15 per person per hour**		

KITCHEN FEES

Rental	FEES	Total of YOUR Rental
Kitchen Rental	\$200.00	\$200
Volunteer Fee 4 hours	\$60	\$60
Kitchen Rental after 4 hours	\$25 per hour	
Volunteer Fee after 4 hours	\$15 per hour	
TOTAL FEES DUE		
Check Date:		Check Number:

- ***I HAVE READ AND UNDERSTAND THE RULES And REGULATION DOCUMENT ON THE LCFC WEBSITE REGARDING THE RENTAL OF THE LISBURN FIRE COMPANY PROPERTY.***
- ***BY SUBMITTING THIS FORM ELECTRONICALLY OR BY PAPER I AGREE TO ABIDE BY THESE RULES, REGULATIONS and ANY ADDENDUMS FOR THE DURATION OF THE ABOVE EVENT.***
- ***IN FURTHER CONSIDERATION OF THE UNDERSIGNED BEING PERMITTED TO USE THE LCFC'S FACILITIES, THE UNDERSIGNED AGREES TO INDEMNIFY, RELEASE, DEFEND AND HOLD HARMLESS LCFC AND ALL OF ITS RELATED ORGANIZATIONS, OFFICERS, LEADERS, COMMITTEES, COUNCILS, AGENTS, SEFVANTS, EMPLOYEES, MEMBERS AND VOLUNTEERS FROM AND AGAINST ALL CLAIMS AND SUITS, SEEN OR UNFORESEEN, ARISING OUT OF OR IN ANY WAY RELATED TO THE GROUP'S USE OF THE LCFC'S FACILITIES, WHICH INCLUDES, BUT IS NOT LIMITED TO PERSONAL INJURY, CHILD OR ADULT MALTREATMENT, NEGLIGENT ENTRUSTMENT, HIRING, SUPERVISION OR RETENTION OF ANY PERSON, PROPERTY DAMAGE OR LOSS, BODILY INJURY, AND DEATH, TO THEMSELVES OR OTHERS, WHETHER INTENTIONAL, RECKLESS OR NEGLIGENT, THAT MAY OCCUR OR IS IN ANY WAY RELATED TO THE UNDERSIGNED'S USE OF THIS FACILITY. NOTWITHSTANDING THE FOREGOING, THIS AGREEMENT TO INDEMNIFY, RELEASE, DEFEND AND HOLD HARMLESS, SHALL NOT APPLY (1) TO ANY CLAIMS, SUITS OR LIABILITY THAT ARISE OUT OF OR ARE THE RESULT OF THE GROSS NEGLIGENCE OR INTENTIONAL CONDUCT OF LCFC PERSONNEL NOT ASSOCIATED WITH THE GROUP, OR (2) TO THE EXTENT SUCH INDEMNIFICATION OBLIGATION OF THE UNDERSIGNED MAY BE LIMITED OR PROHIBITED BY APPLICABLE LAW. THERE IS NO COVERAGE, INDEMNIFY RELEASE, DEFEND AND HOLD HARMLESS FOR THOSE INDIVIDUALS WHO COMMIT INTENTIONAL OR CRIMINAL ACTS.***

Printed Name: _____ Signature: _____

Organization title: _____ Date: _____

Make checks payable to Lisburn Community Fire Company.
All return checks are subject to a service charge. Mail to:

Lisburn Community Fire Company
 Attn: Rental Coordinator
 1800 Main Street, Lisburn
 Mechanicsburg, PA 17055

Please return this agreement signed and dated with your security deposit to the address above.