TOWN OF NAPLES

MUNICIPAL BUILDING FACILITY USE FORM

P.O. Box 1757, Naples, Maine 04055
Phone: (207) 693-6364 / Fax: (207) 693-3667
www.townofnaples.org

Date Submitted: _____ Email: _____

Contact Person: _____ Phone #: _____

Mailing Address: _____

Nature of Program: _____ Organization: _____

Starting Date:_____ *Ending Date:_____ Days of Week: _____

Time in (Including Setup): _____ Time Out (Including Cleanup): _____

Requesting Use Of: _____Naples Gymnasium _____Singer/Grange Hall
_____Large Conference Room _____Small Conference Room

Please note that this form is only valid for three months after the date submitted. If the program's duration persists longer than three consecutive months, a new form will need to be filled out. Also, please be advised that any town sponsored events or programs will take precedence over all over submitted activities.

I understand that the Municipal Offices Building is a chemical free facility. No drugs or alcohol shall be carried onto or used in or on the premises. There is no smoking anywhere inside the building. Tobacco products shall be disposed of properly in the receptacles provided outside the doors.

I have read and understand the policies and regulations governing the use of the Municipal Meeting Rooms/Gymnasium and Singer Community Center. I accept full responsibility for the activities of the group I am representing in this agreement.

ARRANGEMENTS TO OBTAIN KEYS MUST BE MADE WITH THE COMMUNITIES ACTIVITIES DIRECTOR WHEN THIS FORM IS COMPLETE.

_____ _____
Lessee / Applicant Peter Ceprano / Community Activities Director

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The Board of Selectpersons reserves the right to abrogate an agreement when it deems that extenuating circumstances exist or it would be in the best interest of the Town. In this situation all deposit/payments made to the Town will be refunded in full.

CERTIFICATE OF INSURANCE RECEIVED (circle one) YES NO
IF NO, INDEMNICAFICATION AGREEMENT SIGNED YES NO

REFUNDABLE CLEANING DEPOSIT: $10.00
REFUNDABLE KEY DEPOSIT: $25.00
NON-RESIDENT OR COMMERCIAL FEE: $_____

TOTAL AMOUNT PAID: $_____

REFUND CHECK ISSUED: _____

RELEASE AND INDEMNIFICATION AGREEMENT

for Use of Town of Naples Facility

I/we release and forever discharge the **TOWN OF NAPLES** and its officers, officials, employees and agents, in their public and private capacities, from any claims, actions, liability and expenses of any nature by me/us or my/our heirs, assigns or personal representatives resulting from any cause, including negligence and specifically including the negligence of the **TOWN OF NAPLES** and its officers, officials, employees and agents, arising out of or as a result of the use of a town facility for my/our function.

I/we waive any right to sue and promise not to sue for any cause, including negligence and specifically including the negligence of the **TOWN OF NAPLES** and its officers, officials, employees and agents, arising out of or as a result of the use of a town facility for my/our function.

I/we agree to defend, indemnify and hold harmless the **TOWN OF NAPLES** and its officers, officials, employees and agents, in their public and private capacities, from any and against all claims brought against it or them arising out of or as a result of the use of a town facility for my/our function.

_____ _____

Signature(s) of Releaser(s) Date

_____

Print Name(s)

_____ _____

Witness Date