

FACILITY USE APPLICATION AND INDEMNITY AGREEMENT

PARISH: _____

PARISH is understood to include The Roman Catholic Bishop of San Diego, a corporation sole.

FACILITY USE APPLICANT: _____

DATES OF FACILITY USAGE: _____

PARISH FACILITY TO BE USED: _____

TYPE OF FACILITY USAGE: _____

FOR WEDDING RECEPTIONS PLEASE IDENTIFY:

GROOM: _____

BRIDE: _____

Thank you for inquiring about the use of our Parish Facilities. We also thank you for completing this short FACILITY USE APPLICATION AND INDEMNITY AGREEMENT which will allow us to evaluate your request for use of our facilities. Please read the attached PARISH FACILITIES SACRED SPACE POLICY when completing your application to ensure that your proposed usage of our facilities reflects the SACRED RELIGIOUS nature of our facilities. Please ask a parish representative if you have any questions regarding your proposed facility use being consistent with our PARISH FACILITIES SACRED SPACE POLICY.

If the FACILITY USE APPLICATION AND INDEMNITY AGREEMENT is approved, FACILITY USE APPLICANT may be required to provide their own insurance for their event or purchase Special Events Coverage.

In consideration for Parish agreeing to evaluate the FACILITY USE APPLICATION AND INDEMNITY AGREEMENT, FACILITY USE APPLICANT agrees to protect, defend, hold harmless and fully indemnify PARISH for any claims or cause of action whatsoever arising out of the facility use application process, whether such claim arises from the alleged negligence of the PARISH, it's employees or agents, or the negligence of any other party. FACILITY USE APPLICANT agrees to indemnify, protect, defend and hold harmless PARISH for any cause of action whatsoever of alleged discrimination.

If any sentence or paragraph of this agreement is held invalid, it is agreed that the balance thereof, shall continue in full legal force and effect.

SIGNED BY: _____

(Must be an official agent of FACILITY USER)

NAME (Please print): _____

DATE: _____