

Town of Washington

8 SUMMIT HILL ROAD P (413) 623-8878 WASHINGTON, MASSACHUSETTS 01223 F (413) 623-2116

Town Offices/Selectman

Application for the Use of the Washington Town Hall Auditorium

Individual Applicant:	Sponsoring Organization:	
Name:	Name:	
Address:		
 Telephone:	Telephone:	
Purpose and Brief Description of I	ntended Use:	
Date(s) Requested:	Admission Charges: Adult Child Time(s) Requested: nts:	
(You must apply for any necessary licenses Will There Be food prepared on the Washington Selectmen and/or Board of Hea Will There Be food served on the p		:he
Other Requests or Comments:		
Name(s) and Address(s) of Adult S	Supervisors:	
	abide by the attached Policy for the Use of the Toreed copy of the policy must be attached to this app	

Signature of Applicant	Date
Signature of Selectmen/Board of Health	Date



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Policy for the use of the Town of Washington's Auditorium

- The use of the Town's Auditorium for any function shall be on a first-come, first served basis with priority as follows: recurring public use, occasional public use, private use (restricted to Washington residents).
- Scheduling shall be through the Town's Administrative Assistant to the Select Board.
 - Any private user must sign the Facilities Release Form and pay a cleaning fee of \$20.00

FACILITIES RELEASE FORM

I, the undersigned ______, do hereby request to use the Town of Washington Auditorium (including kitchen and bathroom facilities) in connection with an event described as follows ______ (hereinafter, "said use").

In consideration of being allowed to use the Facility, I agree to forever release the Town of Washington, and all its employees, officials, agents, board members, and volunteers and any and all individuals and organizations assisting or participating in connection with said use ("the Released parties"), as well as with respect to any voluntary and/or recreational programs of the Town of Washington, from any and all demands, claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from any and all claims resulting from use of the Town of Washington's auditorium. "All claims" as used in this Release, shall include, but are not limited to, any and all demands, suits, judgments, awards, orders, causes of action and/or rights of action whatsoever that are legally releasable under law, provided such claims relate to or arise from the use of the Town of Washington's Facilities and/or participation in voluntary or recreational programs. I also agree to indemnify, defend, and hold harmless the Released parties against all claims, including but not limited to payment of reasonable attorney's fees in defense of all claims, any insurance deductibles in addition to any award or settlement, and/or payment of any judgment or award arising from or related to any and all claims. I further represent and warrant that I have authority to sign this agreement, and to bind all participants in said use to this Release. If I am unauthorized to bind any participant, I hereby agree to obtain any participant(s)' signature on this Release Form prior to their use of the Facility.

I further affirm that I have read this Release and that I understand the contents and responsibilities of this document. I hereby acknowledge that the fee represents the cost to the Town of using the facility, and that no such fees will create a consumer or business relationship with the Town. I further affirm that I will be responsible for any damage or excessive cleaning.

Participant(s) Signature(s):_____

Date:_____