

# Our Lady Comforter of the Afflicted

920-R Trapelo Road, Waltham, MA 02452-4845 781-894-3481

## OUR LADY'S FACILITIES RENTAL AGREEMENT

Event Description: \_\_\_\_\_

\_\_\_\_\_

Date(s) Requested: \_\_\_\_\_

Time Period: \_\_\_\_\_

Please check all that apply:

Auditorium \$75 per hour effective July 1, 2009

Cafeteria/Kitchen \$75 per hour effective July 1, 2009

Music Room #113 \$50 per hour effective July 1, 2009

Custodial Coverage \$50 per hour Please describe: \_\_\_\_\_

The above rental rates are applicable for each hour of rental or any portion thereof. For example, a group rents the Music Room for 2.5 hours from 7pm until 9:30pm, the group would be charged for 3 hours or \$150; or a group rents the Music Room from 7pm until 10pm, the charge would still be \$150. Therefore the rental rates are based on one hour increments only.

Group is responsible for cleaning the areas and returning them to the condition in which they were provided. If the group is not able to clean the space, then additional custodial coverage must be requested in advance and the group will pay an additional \$50 per hour for this service.

The building must be vacated at the end of the scheduled rental period. Any requests to open the building prior to the agreed upon times, will incur additional fees at the above rates. Any damages to the property will be the responsibility of the individual or group renting the space. No use of the kitchen equipment or appliances is allowed. Catered food is allowed, but must be ready to be served (i.e. food preparation is prohibited).

As discussed, your use of the Parish premises is at your own risk. Furthermore, you agree to assume any and all responsibility for any property damage and/or bodily injury that may arise out of your use of these premises. You agree to defend and indemnify the Parish from and against any and all claims arising out of said use. Your signature below will serve as acknowledgement of and agreement with the terms and conditions outlined above. The attached letter from Denise Moroney, Business Manager, is incorporated into this agreement. Please make checks payable one week prior to event to: Our Lady's School .

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Form Revised May 6, 2009*