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|  | 1790 E. Packard Hwy.Charlotte, Michigan 48813517-543-5500 \* Fax - 517-543-6633[www.eatonresa.org](http://www.eatonresa.org)  |

**Facility Use Agreement Form 7510 F2**

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| Event: |  |
| Event Details: |  |
| Event Supervisor: |  |
| Event Contact #: |  |
| Schedule Room: |  |
| Entrance Door Details: |  |
| Setup: |  |

The Event Supervisor shall be on-site for the duration of the event and shall be responsible for sign-in and supervision of the activity for which the Eaton RESA facility is being reserved. The Event Supervisor agrees to follow all the rules governing use of Eaton RESA and any specific guidelines or restrictions at the sole discretion of Eaton RESA. Locations used shall be subject to Eaton RESA’s discretion and the User will be responsible for all expenses related to its presence at Eaton RESA. Based on the Facility Use Schedule Fee, the cost for using the Eaton RESA Facility is as follows:

|  |  |
| --- | --- |
| Event Setup/Cleanup Fee: | $ |
| Room Use/Security Fee: | $ |
| Technology Fee: | $ |
| TOTAL | $  |

By signing this Agreement I agree to the following terms and conditions.

* I am responsible for supervision of the activity for which the Eaton RESA facility is being reserved.
* I have been provided a copy of Eaton RESA’s rules, guidelines, and restrictions for Eaton RESA facility use and agree to abide by these rules.
* User agrees to defend, indemnify, and hold harmless Eaton RESA, its boards, employees, and representatives from any and all claims, actions, suits, judgments and expenses including claims, costs, attorney fees and damages in connection with its activities resulting in loss of life, bodily or personal injury, product liability claims and/or damage to property arising from or out of use by the User or its agents, members, partners, associates or employees, or any portion of Eaton RESA.
* The User shall, at its own expense, keep in full force and effect until the cessation of its activity, a commercial general liability (CGL) insurance policy having limits of not less than One Million Dollars ($1,000,000) for each occurrence and in the aggregate combined single limits for bodily injury, personal injury and property damage. In addition, the policy shall name Eaton RESA as an additional insured on the policy. (Note: Category 2 groups may be required to have higher insurance limits)

By signing this Facility Use Agreement, I acknowledge the receipt of the Building Use Guidelines and agree to abide by them. Signature also indicates responsibility for payment of facility use fees and any/all damages that may occur as a result of the use of the building and/or services. **This Agreement must be returned 14 days before the event.**

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| Applicant Signature |  | Date |

Eaton RESA does not discriminate on the basis of race, color, national origin, sex, age, or disability in its programs and activities. Civil Rights Coordinators are located at 1790 E. Packard Hwy. Charlotte to handle inquiries regarding the nondiscrimination policies. Telephone (517) 543-5500.