

Roxbury Senior Center Building Use Application and Agreement
7 South Street, Roxbury, Connecticut, 06783 (860) 210-0056

Applicant's Name/Responsible Party _____ Phone# _____
Street Address _____ City _____ Zip Code _____

Activity Description _____

Use Date _____ Hours (Include set-up & clean up time) _____
Rooms requested (check those that apply): Down Stairs ___ Up-Stairs ___ Kitchen ___

Equipment requested (Must be requested at time of application.)

Use of equipment must be approved by the Senior Center Director. All equipment, including furniture, must be returned to its original location and in clean condition.

Specify special room set-up & decorations (You must return room to original condition)

NO SMOKING OR ALCOHOL IS ALLOWED IN BUILDING

Total number of persons attending your function _____

Please read and sign the following.

The Town of Roxbury is not responsible for accidents, injury, illness or loss of group or individuals property. All applicants and individuals using the facility shall indemnify the Town of Roxbury; it's elected and appointed officials and any and all claims for such occurrences as result of persons attending any function at the facility and assume all costs of defending the Town should a claim be brought against it or its agents, employees or elected officials arising out of the Applicant's use of the premises. In consideration of being granted use of the Senior Center, I agree on behalf of the applicant that all members and guest will observe the above Policy & Rules. The Town of Roxbury may require the applicant to present a certificate of insurance, to post a bond, provide a security officer (approved by the Town of Roxbury) or meet other special conditions. I have read the Building Utilization Policies & I understand that I am responsible for the conduct of the participants and myself at the above-described activity. I hereby agree to be responsible for the safekeeping of the facilities used for this activity and for payment of all charges, if any. I further agree that the Town property will be used and maintained in accordance with standards established by the Town of Roxbury and we will further hold said Town harmless for loss of any kind in connection with such use. The information given is true to the best of my knowledge.

SIGNATURE OF APPLICANT/RESPONSIBLE PERSON _____

DATE SIGNED _____

.....
Office Use Only

Certificate of Insurance: Yes ___ No ___ Building Use Policies Attached: Yes ___ No ___

Authorized Signature _____ Date Signed _____

Security Deposit of \$200.00 – Date Received _____ Date Returned _____

