USE OF FACILITIES

Conesus Town Hall Meeting Area 6210 South Livonia Road Conesus, New York 14435 APPLICATION FOR USE OF COMMUNITY FACILITIES

Today's Date:	Date(s) Requested:
Facility Requested:	
INFORMATION ABOU	Γ GROUP
Name of Organization or In	ndividual:
Time: to	Supervisor in charge:
Mailing Address:	
Telephone: (Day)	(Night)
INFORMATION ABOU'	T INTENDED USE OF MUNICIPALITY FACILITIES
1	
	d: Adults: Children:
If needed, state what type a	and for what purpose:
Is an admission fee charged	1? Yes No
If refreshments are served,	give details:
Other:	
AGREEMENT	
agrees to be responsible to covenant and agree to def damages, claims, or action	years of age and has read this form and attached regulations and agrees to comply with them. He/she the Municipality for the use and care of the facilities. He/she, on behalf of Municipality does hereby end, indemnify and hold harmless the Municipality from and against any and all liability, loss, as (including costs and attorneys' fees) for bodily injury and/or property damage, to the extent out of or in connection with the actual or proposed use of Municipality property, facilities and/or
Signature and Position with	nin Organization