



## DIocese OF OGDENSBURG

### *Insurance Claims and Risk Management Office*

604 WASHINGTON STREET • P.O. BOX 369 • OGDENSBURG, NEW YORK 13669  
TELEPHONE: 315-393-2920 • FAX: 1-866-519-6423 • email: jcarter@rcdony.org or rreynolds@rcdony.org

### **Parish Facilities Use Application**

I/We \_\_\_\_\_ hereby apply to use the \_\_\_\_\_ of  
user name building name  
\_\_\_\_\_ on or over the dates of \_\_\_\_\_ for the  
parish  
purpose of \_\_\_\_\_.

I/We hereby agree to execute the appropriate contract or agreement required for our use of the facility to wit:

1. A Lease agreement if the use is total occupancy of space over a protracted (yearly) period.
2. A Facilities Use Agreement for regular long term use of space such as weekly or monthly meetings or gymnasium use.
3. An application for Special Events Insurance Coverage for any one time use not exceeding 72 hours.

It is fully understood that we will maintain the facility in its present condition and return it to that condition at the end of our use.

We also agree to hold the \_\_\_\_\_ and the Diocese of Ogdensburg  
parish

harmless for any bodily injury or property damage that may result from our use of the facility and to formally acknowledge our hold harmless obligation through the execution of the appropriate contract as listed above.

It is expressly understood that the \_\_\_\_\_ retains the right to  
parish

cancel any of the above listed agreements for cause at any time events make it necessary or proper to do so.

We affirm the activities for which we desire use of parish facilities shall not be contrary to the teachings of the Church.

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