

St. Patrick's Church
Post Office Box 860, Arroyo Grande, Ca 93421
(805) 489-2680 Fax (805) 489-1316 email: info@stpatsag.org
“SHORT TERM USE AGREEMENT FORM FOR INDIVIDUALS OR GROUPS”
(Facility Use Form)

NON - PROFIT GROUP/ORGANIZATION/MINISTRY _____

Purpose of this event: _____

List speakers for this event: _____

Will alcohol be served: _____ Number of people anticipated: _____

Certificate of Insurance enclosed: On file

Agreement, between St. Patrick's Church (herein **“Parish”**) and the responsible Individual (herein **“User”**), relating to the following facilities:

This permission is granted upon these additional terms and conditions and is non-assignable.

| Please list each date you request | | | | |
|-----------------------------------|------|-----|-------------------------|-----------------------|
| FACILITY | DATE | DAY | YOUR TIME IN / TIME OUT | (Start time of event) |
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1. The Use stated above is the only use permitted under this Agreement.
2. User shall leave the facilities in a clean and orderly condition; and if any alterations were allowed, restore the facilities to their original condition; and shall repair any damage arising out of the use of the facilities under this Agreement. If you have any further questions on guidelines please contact the Business Manager, Cristina Curzi, at (805)489-2680 ext. 16.
3. User agrees to defend, indemnify and hold harmless the Diocese of Monterey and the parish and their employees, agents, and guests from and against any and all claims, damage, loss liability or expenses including without limitation, attorneys fees and costs attributable to user's use of the premises.
4. User must provide and maintain General Liability insurance during the period covered by this Agreement insuring the Diocese of Monterey against liability for bodily Injury (including death) and Property Damage from occurrences in or about the facilities or the use or condition thereof, with at least combined Single Limits of \$2,000,000.00. Such policy or policies shall name as

additional insured (s) the entities and persons named or described herein. This insurance shall be primary and any other insurance available to the Diocese of Parish shall not be called upon to contribute. The user may secure coverage to meet these Diocesan Insurance Requirements by purchasing coverage through the “Special Events Liability Insurance Program for Outside Users of the Diocese of Monterey facilities”. Any alternative source for the User of this required insurance coverage must

be evidenced by furnishing Certificate of Insurance and Policy Endorsement acceptable to the Diocesan Director of Insurance. These must be received by:

The Roman Catholic Bishop of Monterey, A Corporation Sole,
Attention: Director of Insurance,
P O Box 2048,
Monterey, CA 93942

at least twenty days prior to use of the facilities. Said insurance shall provide the Certificate of Insurance and policy endorsement shall state that such insurance cannot be modified or cancelled without thirty days notice to the above address.

5. As used herein the term “Diocese of Monterey” includes St. Patrick’s Catholic Church, 501 Fair Oaks Avenue, Arroyo Grande, CA and the Roman Catholic Bishop of Monterey, A Corporation Sole, and all other constituent organizations of the Diocese, and their officers, agents and employees. 6. User will not use the premises for any purpose that is inconsistent with the parish’s religious purpose or philosophy.

7. Parish may terminate this agreement and permission to use such facilities at any time without obligation.

Please file your approved copy of the Facility Use Form for future reference.

If you choose to cancel or change the event, please make a copy of your approved form, note the changes on the form and return to the parish office for processing.

Please allow at least one week to process forms.

Do not assume the facility for your event is reserved until you receive written approval.

Last minute Parish events may take priority over your organization’s event.

Special Provisions & Notes:

Responsible Individual’s Name _____ Telephone _____

Mailing Address _____

E-mail address _____

Signature _____ Date _____

Approval: _____ Date _____

Business Manager

Entered in Parish Calendar on _____ by _____