

Frederick County Government Facility Reservation Request

Attachment 3

Office of Property Management – 577'0 qpvxwg"Ncpq"Uwkg"422."Hgf gtlm"OF "43924

Phone: 301-600-1494 Fax: 301-600-3517

Applicant Information

(Please Print)

Applicant is: Individual Organization
Applicant Name: _____
Address: _____
Contact person if applicant is an organization: _____
Phone: _____ Cell: _____ Fax: _____
Email: _____
Is applicant a Federal Government Agency Yes No or a 501(c)3 non-profit Yes No

Facility and Activity

Facility Requested: _____
Description of Activity: _____
Special Requirements: _____
Date(s): _____
Time: From _____ To _____

Conditions of Approval

1. The County, its agents and employees shall not be liable for any loss, damage, injuries or other casualty of whatsoever kind or by whomsoever caused to the person or property of anyone on or off the premises, arising out of or resulting from applicant's use, possession or operation thereof, or from installation, existence, use, maintenance, condition, repair, alteration, removal or replacement of any equipment thereof, and the applicant hereby agrees to indemnify and hold the County, its agents and employees harmless from and against all claims, demands, liabilities, suites or action for such loss, damage, injuries or other casualty.
2. Applicant agrees to:
 - a. Maintain peace and good order during the use of the facility.
 - b. Prohibit alcoholic beverages, and controlled dangerous substances in the facility.
 - c. Prohibit smoking in the facility.
 - d. Assume responsibility for any and all property damages to the facility caused by participants, members, guests, or the general public.
3. Applicant has received a copy of the County's Policy on Facility Use of Frederick County Government Buildings Policy and agrees to abide by the policy, including payment of fees, if applicable. **Payment, if required, should be made payable to Treasurer of Frederick County, and submitted with this application.**

Applicant: _____
Signature Print Name Date

County Use Only

Fee Charged: Yes No If yes, total amount due: \$

Government County/Employee Volunteer Adult Youth

_____	_____	_____	Approved	Not Approved	
Building Manager	Date		Approved	Not Approved	
_____	_____	_____	Approved	Not Approved	Conditions
Financial Services Manager	Date				
_____	_____	_____			
Office of Property Management	Date				