

Amberson Community Center
Amberson Valley Athletic Association
19289 Amberson Rd PO Box 68
Amberson, PA 17210

Facility Rental Agreement

- All facilities must be left clean and, in the order, that it was found at the beginning of the contract period.
The tables and chairs must be returned to their original positions and clean.
- The security deposit is subject to forfeiture if these conditions are not met.
- NO SMOKING is permitted within the buildings. No illegal substance is permitted on any of the property.
- Alcoholic beverages may not be served without the written permission of the board
- No gas appliances will be available for use. Minimal kitchen use upon written permission by board.
 - Payment of \$100.00 is due in full prior to the reservation date.
 - The amount of \$25.00 will be refunded if there is no damage and everything is clean and in the condition the center was in upon arrival.

A check will be mailed after inspection if clean.

- If damage occurs in any area at any time of the event, the renter will be responsible for damages.
- If damages are greater than the deposit, the difference will be added to the rental fee.

NO LIABILITY/INDEMNIFICATION/HOLD HARMLESS: The owners of the **Amberson Valley Athletic Association/Amberson Community Center** do not assume liability for loss, theft, damage, or injury (or death) to persons or their property. The individual or group renting the **Amberson Valley Athletic Association/Amberson Community Center** property agree to indemnify and hold the owners of the **Amberson Valley Athletic Association/Amberson Community Center** property harmless for any liabilities, theft damage, cost or expense whatsoever arising from or related to any claim or litigation which may arise out of or in connection with the individual or groups' use and occupancy of the rental property, including, but not limited to claims for personal injury or property damage/loss.

Date of Rental: ____/____/____

Name of individual or group renting the facility _____

Signature: _____ Date ____/____/____

Individual or Group Representative

Print Name: _____

Contact # : _____

Name: _____

Amberson Community Center Representative