



Dan Sunderman  
Fire Chief  
City of Sharonville Fire Department  
Station 86  
11637 Chester Road  
Sharonville, OH 45246  
513-563-0252

## Facility Agreement for Event/Assembly

This agreement is entered into by and between the City of Sharonville and \_\_\_\_\_ (name of the organization/responsible party) to utilize a facility within the City of Sharonville Fire Department on \_\_\_\_\_ (date) between the hours of \_\_\_\_\_ & \_\_\_\_\_. **Use of Fire Department facilities is limited to Monday through Friday, no later than 8:00 pm. Facility bookings cannot be scheduled more than 30 days in advance. All events are subject to cancellation if it is determined that they conflict with department training.**

The undersigned agrees that they will not use or occupy said premises for unlawful purposes, or permit others to use the premises for unlawful purposes, and will conform to and abide by all laws or regulations of any governmental body or agency, and the rules and regulations of the City of Sharonville concerning said premises or the use thereof. The entity utilizing the facility may be requested to submit insurance documentation naming the City as an additional insured.

THE UNDERSIGNED HEREBY AGREES TO ASSUME ALL RISK OF INJURIES TO PROPERTY OR PERSONS OR DEATH RESULTING FROM UTILIZING THIS FACILITY. THE UNDERSIGNED HEREBY AGREES THAT IT WILL INDEMNIFY AND HOLD HARMLESS THE CITY, ITS OFFICERS, AGENTS, AND EMPLOYEES FROM ANY AND ALL LIABILITY OF EVERY KIND, NATURE, OR DESCRIPTION, ARISING OUT OF ANY AND ALL CLAIMS, DEMANDS, LAWSUITS, OR JUDGMENTS, WHICH MAY BE BROUGHT BY ANY PERSONS, FIRMS OR CORPORATIONS AGAINST THE CITY, ITS OFFICERS, AGENTS, AND EMPLOYEES, BY REASON OF ANY AND ALL ACCIDENTS OR INCIDENTS OF EVERY KIND AND DESCRIPTION.

By my signature, I, the undersigned, am indicating my understanding of the regulations herein. Further, by my signature, I am indicating my understanding and voluntary agreement to the Indemnification and Release of the City of Sharonville and the City of Sharonville Fire Department from any liability associated with utilizing this city facility.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_