

FACILITY USAGE/INDEMNITY AGREEMENT

PARISH: _____

FACILITY USER: _____

DATES OF FACILITY USAGE: _____

TYPE OF FACILITY USAGE: _____

The above named FACILITY USER agrees to defend, protect, indemnify and hold harmless the above named PARISH against and from all claims or causes of action arising from the use of the facility and operations of the above named FACILITY USER including claims initiated by third parties or claims arising from the actions of its employees, agents, family members, officers, volunteers, partners, organizational members or associates.

FACILITY USER agrees to provide a certificate of insurance to the PARISH which provides evidence of general liability coverage of not less than One Million Dollars (\$1,000,000) per occurrence. FACILITY USER also agrees to have the PARISH names as an "Additional Insured" on its general liability policy for the DATES OF FACILITY USAGE in relationship to the TYPE OF FACILITY USAGE for claims which arise out of FACILITY USER'S operations or are brought against the PARISH by FACILITY USER'S employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates. FACILITY USER also agrees to ensure that its liability insurance policy will be primary in the event of a covered claim or cause of action against the PARISH.

If and only if FACILITY USER fails to comply with the above (second) paragraph, then the above names FACILITY USER agrees to protect, defend, hold harmless and fully indemnify the above names PARISH for any claim or cause of action whatsoever arising out of or related to the usage which takes place during the above identified DATE/S OF FACILITY USAGE that is brought against the PARISH by the above named FACILITY USER or its employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates, whether such claim arises from the alleged negligence of the PARISH, its employees or agents, or the negligence of the FACILITY USER.

SIGNED BY: _____

(Must be an official agent of FACILITY USER)

NAME AND TITLE: _____

DATE: _____