

JACKSON TOWNSHIP HALL RENTAL FORM

JACKSON TOWNSHIP 100 E Mississippi Ave PO Box 355 Elwood, IL 60421 815-423-5771 phone

SupervisorMatt Robbins

Highway Commissioner Matthew Walsh

Clerk Kathryn Hunt

Assessor Delilah LeGrett

Trustees

Norm Fanning Michele Hallihan Coley O'Connell Jake Fanning

Jackson Township Resident Rental \$50 fee/ \$50 deposit

Non-Resident Rental \$100 fee/ \$150 deposit

All Deposits and fees must be paid at time of reservation. Deposit return will be mailed within a week of the rental date.

Contact Information

	Contact informa	Ition
Name:		
Address:		
Phone Number:		
Email Address:		
Date of Event:	Time of Arrival:	Time of Departure:
Wai	ver & Release for Jackson T	ownship Hall Rental
	Sponsoring Organization/Grose the Jackson Township Hall,	up has been given permission from subject to terms below.
Jackson Township harn might arise as the result defend Jackson Townsh defense of any suit, clai	nless against any and all suits, t of any activities, and the Spo nip and indemnify it against an m of any time arising out of the be awarded against Jackson	Organization/Group guarantees to hold claims or actions of any manner which nsoring Organization/Group agrees to y and all expenses incurred in the e activity or any damages, judgements Township in the event that a suit should
verifying \$1,000,000 milinsured, accompanied boor equivalent, and speci	nimum general liability coverago by a properly executed, additio	up will provide a certificate of insurance ge naming Elwood as an additional nal-insured endorsement using eg2015 event no later than seven (7) days olic beverages.
for the specific activity of	or activities identified and for of	n Township to use its property/facilities ther valuable consideration provided or 'Group agrees to all conditions.
agree to assume all res and its members, and to facility used by the orga event as to return it to the	ponsibility for the conduct and o make payments to Jackson in nization and/or group. I also a ne same condition as it was pr	zation/Group or it's participants further safety of the organization and/or group Fownship for any damages done to the agree to clean the facility following the ior to the event. In the event the lity to the above condition, it shall forfeit
		up agrees to all of the conditions of this 〈, Chapter 94, parks and recreation.
Applicant Signature		Date
Approved by:		

JacksonTownshipIL.com JacksonTownshipSupervisor@hotmail.com



Waiver of Liability, Assumption of Risk, and Indemnity Agreement

In consideration of being permitted to participate in any way in any activities or opportunities offered or permitted in connection with the use of the Jackson Township Town Hall, located at 100 E. Mississippi Ave., Elwood, IL (hereafter "Township Facilities") during the period set forth below ("Reservation Date"), I, for myself, my heirs, personal representatives, agents, invitees and assigns, do hereby release, waive, discharge, and covenant not to sue Jackson Township, an Illinois unit of local government and its elected officials, employees, volunteers and agents (collectively "Released Parties"), from any and all liability for any claims, loss or damages, including but not limited to personal injury, including death, and any property loss or damages arising from or during the use of the Township Facilities or the participation in any activities or opportunities offered or permitted in connection with the use of the Township Facilities.

I acknowledge that participation in any activities or opportunities offered or permitted in connection with the use of the Township Facilities may carry with it certain inherent risks of personal injury and/or damage to property. I hereby assume any and all such risks.

I hereby agree to INDEMNIFY, DEFEND AND HOLD HARMLESS the Released Parties of and from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my participation in any activities or opportunities offered or permitted in connection with the use of the Township Facilities, and agree to reimburse the Released Parties for any and all such expenses incurred by Released Parties in connection therewith.

Acknowledgements of Understanding: I HAVE CAREFULLY READ THIS WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREMENT; I UNDERSTAND THAT THIS IS A LEGAL DOCUMENT, I FULLY UNDERSTAND THE TERMS SET FORTH HEREIN; AND I UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS, INCLUDING BUT NOT LIMITED TO MY RIGHT TO SUE. I ACKNOWLEDGE THAT I AM SIGNING THIS DOCUMENT FREELY AND VOLUNTARILY AND INTEND BY MY SIGNATURE TO BE BOUND TO THE TERMS SET FORTH IN THIS DOCUMENT.

Reservation Date(s):
Address of Resident:
Signature of Resident:
Date: