Oakes Community Center
Long Term Rental Agreement

Responsible Party Name: _____ Phone # _____

Address: _____

Date of Agreement: _____

<table>
<tr><td></td><td><u>Rate</u></td></tr>
<tr><td>Rental for Programs (longer than 6 weeks)</td><td>$30.00 per use</td></tr>
<tr><td>Cleaning Deposit (refundable)</td><td>$100.00</td></tr>
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**Dates/Times must be reserved to guarantee availability, if possible please attach calendar

Additional Information:

TOTAL Cost for Rental $_____

LIABILITY STATEMENT

      The City of Oakes, its trustees, agents, officers and employees assume no responsibility for the person or property of anyone using the Community Center. The responsible party named above shall remove all personal items and property brought into the center at the conclusion of the function unless prior arrangements have been made with the City. The responsible party and all guests will be responsible for compliance and adherence to the City of Oakes Community Center Facility Rental Policies and Procedures and all specifications of the rental agreement.

      In consideration of the use of the Community Center, the reserving responsible party agrees to indemnify the City of Oakes, its trustees, officers, agents and employees and hold them harmless from and against any and all liability, damage, expense, cause of action, suits, claims or judgments arising from or related to injury to persons or property occurring in or about the premises and upon the adjoining sidewalks, streets or ways which may arise from the City of Oakes's ownership and management of the premises, or from any action or omission of the reserving responsible party, its agents, employees, guests, or licensees, or from any cause whatsoever. (The City of Oakes reserves the right to refuse to rent to any party that does not comply with the terms of the agreement, policies & procedures.)

I have read, understand, and agree to the guidelines and regulations stated in the attached Facility Use Policy and Procedures as well as the above liability statement.

_____   _____
APPLICANT (Responsible Party) Signature   Date

CITY OF OAKES USE ONLY: K*ey* # _____

❑   Key Given To: _____

❑   Key Expiration Date: _____