

Facility Rental Agreement and Release Form

Last updated: 01/25/2023

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Name of Organization or Individual(s)	
Type of Event	
Event Date(s)	
Contact Information:	
Name of Person Responsible	Role/Relationship
Mobile Phone/Text()	Phone #2()
Email	
Address	City State Zip

Agreemen	t/Waiver/Release
statements are true to the best of my knowledge. Ac and I and/or the organization I represent agree to be of The Box. I and/or the organization I represent u	of the above organization (if any). I certify that the above common comm
of the Foursquare Gospel, CitySalt Church, Emerald directors and employees from and against any and a result of any activity occurring while renting The Bo	nnify, defend, and hold harmless The Box, International Churd I Community Fellowship and any officials, agents, member all claims of injury to property or persons that may arise as ox including any claims brought by third parties. I and/or the nage and/or vandalism to premises or facilities used in relation
Signature	Date