



THE CORPORATION OF THE VILLAGE OF SLOCAN

Application to Use Community Facilities

Date: _____

The _____
(Name of organization or person)

(Address)

(Phone)

Requests permission to use the _____ on:

(Date(s))

(Time(s))

(Purpose)

The applicant will:

- Exercise care in the use of the facilities and be responsible for any damages incurred.
- Be responsible for leaving the premises clean
- Be responsible for complying with Health department regulations and guidelines

SIGNED AT SLOCAN, BRITISH COLUMBIA, THIS _____ DAY OF _____, 20____.

Witness

Signature of Applicant



THE CORPORATION OF THE VILLAGE OF SLOCAN

**RELEASE OF LIABILITY, WAIVER OF CLAIMS,
ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT
BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN
LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE**

PLEASE READ CAREFULLY

I/We _____, the undersigned, for myself, my heirs, executors,
administrators, successors and assigns:

- (i) hereby release and forever discharge The Corporation of the Village of Slocan, its officers and employees from any and all actions, causes of action, claims, demands for, or by any reason of any damage, loss, injury or death, to person and property which heretofore has been, or hereinafter may be sustained in consequence of:

and

- (ii) hereby agree to indemnify and save harmless The Corporation of the Village of Slocan, its officers and employees from all claims and demands, actions, suits or other proceedings and from all loss and costs of any kind whether wholly or partially, which may be caused by or arise out of, or be in any way attributable to:

SIGNED AT SLOCAN, BRITISH COLUMBIA, THIS _____ DAY OF _____, 20__.

Witness

Signature of Applicant