Rental Application and Agreement

Application is hereby made to the San Angelo Health Foundation for use of the portion of the San Angelo Visitor Center as shown:

	Facilities:		F	River Viev River Viev Rock Roo	v Room II
Date:	Time:		 		-
Hours	:		 		-
	Rental:	\$	 		
	Caterer:				_
		food	 _tea & cof	fee	alcoholic beverages

Conditions:

(1) any cancellation will be given in writing to the San Angelo Health Foundation not less than seven days prior to the scheduled event to receive a full refund of the deposit. If cancelled less than seven days, but more than two days, prior to the event, then one-half of the deposit will be returned.

(2) the applicant has received a copy of the rules and regulations governing the use of the Visitor Center and agrees to faithfully abide by all of its terms.

(3) the San Angelo Health Foundation may cancel the agreement, returning the full amount of any deposit, in the event the mechanical or physical condition of the building renders the facilities unuseable for the scheduled event.

As part of the consideration for the requested use of the Visitor Center, the undersigned agrees to indemnify and hold the San Angelo Health Foundation harmless from any and all claims for damage or loss to persons or property, including attorney's fees and court costs, that may arise from or relate

to the use of the Visitor Center facilities by the applicant, its members and guests.

Applicant:

Name	
Address	
by:	
Authorized Representative	
Acceptance	
The San Angelo Health Foundation accepts the foregoi receipt of \$ as a deposit, check #	ng application and acknowledges
San Angelo	Health Foundation
by:	
Deposit refunded:	
Key card returned	
Date	