

## St. Joseph Parish - Key West Gymnasium Rental Application

*Please print the following information.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Purpose of Rental: \_\_\_\_\_

\_\_\_\_\_

Rental Date(s) & Time(s): \_\_\_\_\_

\_\_\_\_\_

Rental Fee in the amount of: \_\_\_\_\_ was given to the parish office in the  
form of a cash or check on: \_\_\_\_\_ (date).

*Gymnasium Rental Rate: \$20.00 for the first hour, and \$10.00 an hour for each  
succeeding hour.*

I have read the St. Joseph Gymnasium Rental Policy. I agree to all the terms of the  
Gymnasium Rental Policy and agree to accept responsibility for use of the facility on the  
date(s) and time(s) listed above. I have signed the Hold Harmless/Indemnity  
Agreement and/or presented proof of insurance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_