

**St. Joseph Parish - Key West
Hall 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).

I have read the St. Joseph Hall Rental Policy. I agree to all the terms of the Hall 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: _____