

Village Of Glen Ellyn  
Glen Ellyn Civic Center  
535 Duane Street  
Glen Ellyn, IL 60137

Name of Group: \_\_\_\_\_

Contact/User Name: \_\_\_\_\_

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

Telephone #: Home: ( ) \_\_\_\_\_ Work: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

*User(s) acknowledge(s) they have read and understand the Glen Ellyn Civic Center Rules and Regulations.*

User(s) agree(s) to indemnify and hold harmless the Village of Glen Ellyn, its agents and employees from and against any and all loss or liability of any nature relating to the use of the Civic Center including, but not limited to, injury or death of any persons, damage or destruction of property, including loss of use thereof.

User(s) agree(s) that the Village of Glen Ellyn and its agents and employees assume no liability whatsoever relating to the use of the facilities or the cancellation by the Village of the planned use of the facilities.

User(s) acknowledge(s) that the Village of Glen Ellyn may require user(s) to provide evidence of insurance in an amount and types sufficient to satisfy the needs of the Village and listing the Village as an additional insured.

User(s) acknowledge(s) receipt and understanding of the Glen Ellyn Civic Center Rules and Regulations and agrees that user(s) and all those attending the function shall abide by and be bound by the same.

User(s) agree(s) to notify the Village of Glen Ellyn Administration Department at least twenty-four (24) hours in advance of facility use if the facilities will not be used on the date or dates reserved.

User(s) agree(s) and understand(s) that the Village of Glen Ellyn may cancel this agreement for any reason and will attempt to give at least twenty-four (24) hours advance notice. In addition, it may be necessary to preempt the use of the Civic Center for use by the Village of Glen Ellyn.

Category 2, 3 and 4 user(s) are required to post a \$100.00 security deposit, which is refundable, and pay for user scheduling and equipment rental fees, as necessary, with this contract to schedule the date(s) requested. Checks should be made payable to the Village of Glen Ellyn. Credit cards are not accepted.

User(s) understand(s) custodians will set up the room according to the diagram on the reverse side of this document. Changes to the set up will be made in advance of the scheduled meeting by calling 630/469-5000.

Signature of User: \_\_\_\_\_

For Contract Year: SEPTEMBER 6, 2011 through AUGUST 10, 2012



# TEAM ROSTER

List names and addresses of all players and coaches below:

Name

Address

|     |       |
|-----|-------|
| 1.  | _____ |
| 2.  | _____ |
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