Oswego Fire Protection District

3511 Woolley Rd, Oswego, IL 60543

Oswego Fire Protection Training/Conference
Room Rental Application

To request a reservation for the Training/Conference Room, please read the *Oswego Fire Protection Conference Room Reservation Rules Regulation & Policy.* After understanding complete and submit this form. Ensure all required fields with(*) are filled out accurately.
Email the completed form to: ***Meetingroom@oswegofire.com.***

1. *Type of Organization:(*)*

☐ *Government Entities*
☐ *Not-For-Profit*

2. *Reservation Date(*)*

_____

Available Hours
Mon-Fri 8 am - 10 pm
Sat/Sun 8 am - 7 pm

3. Organization Name:(*)

_____

4. Contact Name: Phone Number & Email:(*)

_____ _____ _____
Name **Number** **Email**

5. *Total Estimated Attendance:* (*) Supervision: One adult per seven minors under 18

Adult _____ **Minors** _____

6. Will food or Beverages be served?(*)

☐ Yes ☐ Food ☐ Beverages
☐ No

7. Meeting Times (*) Start: _____ am ☐ pm ☐ Finish: _____ am ☐ pm ☐

When requesting a meeting time, please be sure to include adequate time for your group's set-up and clean-up.

8. Groups using the Training / Conference Room must provide a certificate of insurance with the exact time and date the room will be used specified and the OFPD listed as an additional insured. The certificate should reflect the following limits of insurance:
That is required by Oswego Fire Protection District: (*)

☐ Agree
☐ Disagree

9. I have read the *Oswego Fire Protection District Central Station Meeting Room Policy & Procedures* and agree to its provisions. I agree to indemnify, hold harmless and defend the Oswego Fire Protection District from and against any and all personal injuries and/or loss of personal property sustained by applicant's attendees arising out of the facility use applied for under the *Oswego Fire Protection District Central Station Meeting Room Policy & Procedures*.

The organization accepts responsibility: to return the room to a reasonable state of cleanliness; return the room to the state and arrangement in which it was prior to its use; immediately notify a Fire District employee of, and be financially responsible for, any damage caused to the room. Further, the organization understands that failure to abide by the Meeting Room Policy & Procedures and its provisions thereby consents to immediate cancellation of any pending reservations as well as consideration for future reservations.

If you sign your name, you agree to the terms you have read above.

Signature **Date**