



MR. DANIEL JONES
MR. JONATHAN SAMS
MR. SPENCER CROPPER
MS. AMANDA CHILDERS

TRUSTEE
TRUSTEE
TRUSTEE
FISCAL OFFICER

Reservation Agreement

We/I _____ (Name or Name of Organization) agree to hold harmless Turtlecreek Township, Warren County, Ohio, elected and appointed officials, employees, and agents of Turtlecreek Township Meeting Room and assume responsibility for, and defend at our/my own expense, all claims for damage to property and persons, including medical expense, for injuries incurred and arising incidental to the use of the facility involved. It being further understood and agreed that Turtlecreek Township assumes no obligation or responsibility in connection with said use of facility. We/I further agree to assume all cost of damage to the building/grounds/ or contents during the period authorized and all results of said use of facility and/or contents.

Please let us know as quickly as possible if you change your plans so the meeting room may be offered to other interested parties. Turtlecreek Township reserves the right to revoke any permit granted for misrepresentation in the application or violations of the terms and conditions of the permit and/or the guidelines for use and the laws of the State of Ohio.

Applicant Signature _____ Date _____

Township Authorization _____ Date _____

THIS IS A REVOCABLE PERMIT.



670 North State Route 123
Lebanon, OH 45036



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