



## North Bastrop County Community Annex Meeting Room Reservation Application

Name of Individual filling out Application: \_\_\_\_\_

Organization Name \_\_\_\_\_

Organization Address \_\_\_\_\_

Organization or contact telephone number \_\_\_\_\_

Meeting Date \_\_\_\_\_

Meeting Time (Including setup and cleanup) \_\_\_\_\_ to \_\_\_\_\_

Purpose of function

---

---

As the authorized representative of the above organization, I hereby apply for the use of the Community Room of the North Bastrop County Community Annex. My organization and I agree to follow all the rules and procedures listed in the Meeting Room Policy, which I have been provided and have reviewed, and understand that my organization or me, personally, will be responsible for paying any damage or losses, or clean-up expenses that may result in the above group's use of the Community Annex's facilities.

**RELEASE AND WAIVER OF LIABILITY AND ASSUMPTION OF RISK** The individual named below on behalf of the above names organization desires to use the North Bastrop County Community Annex Meeting Room provided by Bastrop County, Texas for its activity and in recognition of the County's reliance hereon, I agree to all the terms and conditions set forth in this instrument. Releasor hereby waives, releases and forever discharges any and all claims for damages for personal injury, death, or property damage which releasor or a member of their organization may accrue as a result of the use of the Bastrop County property.

**Indemnity. THE UNDERSIGNED ON BEHALF OF THEIR ORGANIZATION AGREES TO INDEMNIFY, DEFEND, AND HOLD BASTROP COUNTY, ALONG WITH THEIR RESPECTIVE AGENTS, EMPLOYEES, INVITEES, LICENSEES, OR VISITORS (COLLECTIVELY, "COUNTY") HARMLESS AGAINST ALL CLAIMS, DAMAGES, AND COSTS (COLLECTIVELY, "CLAIMS") INCURRED BY OR ALLEGED AGAINST COUNTY AND ARISING OUT OF OR RELATING TO ANY ACT OR OMISSION OF THE UNDERSIGNED OR ANY OF THE UNDERSIGNED'S AGENTS, EMPLOYEES, CONTRACTORS, LICENSEES, OR VISITORS (COLLECTIVELY, "GUEST") WHILE AT THE PREMISES, INCLUDING ANY CLAIMS BASED ON ANY (a) INJURY TO OR DEATH OF ANY PERSON(S), (b) DAMAGE TO OR LOSS OF PROPERTY, OR (c) FAILURE OF**

GUEST TO COMPLY WITH (i) ANY APPLICABLE LAWS, (ii) THE RULES FOR THE USE AND ENJOYMENT OF THE PROPERTY AS REASONABLY ESTABLISHED BY THE COUNTY.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

Approved \_\_\_\_\_

Not Approved \_\_\_\_\_

Reason not Approved

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Precinct 4 Commissioner

\_\_\_\_\_  
Date