

# LISBURN FIRE COMPANY FURNITURE AGREEMENT

**(Please Print All Requested Information)**

<b>Organization (opt.)</b> <i>Please submit a copy of your liability insurance coverage.</i>		
<b>Primary Contact:</b>		
<b>Mailing Address:</b>		
<b>Phone (Home):</b>	<b>(Cell):</b>	<b>(Other):</b>
<b>E-mail address:</b>		
<b>Secondary Contact:</b>		
<b>Mailing Address:</b>		
<b>Phone (Home):</b>	<b>(Cell):</b>	<b>(Other):</b>
<b>E-mail address:</b>		

<b>Planned Event</b>		
<b>Requested Pick Up:</b>	<b>(Date):</b>	<b>(Time):</b>
<b>Requested Return:</b>	<b>(Date):</b>	<b>(Time):</b>

**FEES:**

Type of Rentals	Prices	X # of Tables	X Number of days	=Total Fees
Security Deposit:	<b>\$100</b>			<b>\$100</b>
Check Date:			Check Number:	
Table:	<b>\$3 per day</b>			
Chairs:	<b>\$1 per day</b>			
Donation (optional)				
<b>TOTAL FEES DUE</b>				
Check Date:			Check Number:	

- ***I HAVE READ AND UNDERSTAND THE RULES And REGULATION DOCUMENT ON THE LCFC WEBSITE REGARDING THE RENTAL OF THE LISBURN FIRE COMPANY PROPERTY.***
- ***BY SIGNING AND SUBMITTING THIS FORM ELECTRONICALLY OR BY PAPER I AGREE TO ABIDE BY THESE RULES, REGULATIONS and ANY ADDENDUMS FOR THE DURATION OF THE ABOVE EVENT.***
- ***IN FURTHER CONSIDERATION OF THE UNDERSIGNED BEING PERMITTED TO USE THE LCFS'S FACILITIES, THE UNDERSIGNED AGREES TO INDEMNIFY, RELEASE, DEFEND AND HOLD HARMLESS LCFC AND ALL OF ITS RELATED ORGANIZATIONS, OFFICERS, LEADERS, COMMITTEES, COUNCILS, AGENTS, SEFVANTS, EMPLOYEES, MEMBERS AND VOLUNTEERS FROM AND AGAINST ALL CLAIMS AND SUITS, SEEN OR UNFORESEEN, ARISING OUT OF OR IN ANY WAY RELATED TO THE GROUP'S USE OF THE LCFC'S FACILITIES, WHICH INCLUDES, BUT IS NOT LIMITED TO PERSONAL INJURY, CHILD OR ADULT MALTREATMENT, NEGLIGENT ENTRUSTMENT, HIRING, SUPERVISION OR RETENTION OF ANY PERSON, PROPERTY DAMAGE OR LOSS, BODILY INJURY, AND DEATH, TO THEMSELVES OR OTHERS, WHETHER INTENTIONAL, RECKLESS OR NEGLIGENT, THAT MAY OCCUR OR IS IN ANY WAY RELATED TO THE UNDERSIGNED'S USE OF THIS FACILITY. NOTWITHSTANDING THE FOREGOING, THIS AGREEMENT TO INDEMNIFY, RELEASE, DEFEND AND HOLD HARMLESS, SHALL NOT APPLY (1) TO ANY CLAIMS, SUITS OR LIABILITY THAT ARISE OUT OF OR ARE THE RESULT OF THE GROSS NEGLIGENCE OR INTENTIONAL CONDUCT OF LCFC PERSONNEL NOT ASSOCIATED WITH THE GROUP, OR (2) TO THE EXTENT SUCH INDEMNIFICATION OBLIGATION OF THE UNDERSIGNEDMAY BE LIMITED OR PROHIBITED BY APPLICABLE LAW. THERE IS NO COVERAGE, INDEMNIFY RELEASE, DEFEND AND HOLD HARMLESS FOR THOSE INDIVIDUALSWHO COMMIT INTENTIONAL OR CRIMINAL ACTS.***

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Organization title: \_\_\_\_\_ Date: \_\_\_\_\_

Please review entire agreement before signing and returning this application with your security deposit. Make checks payable to Lisburn Community Fire Company.

***All return checks are subject to a service charge.***

Lisburn Community Fire Company  
 Attn: Rental Coordinator  
 1800 Main Street, Lisburn  
 Mechanicsburg, PA 17055

***Please return the first two pages signed and dated with your security deposit to the address above.***

## LISBURN FIRE COMPANY FURNITURE RENTAL TERMS

- Renter is responsible for safe transport of all LCFC property. This includes proper stacking and strapping during transport.
  - Our tables are wooden, and therefore heavy. A suitable vehicle is recommended, preferably a ½ ton or greater pickup truck or trailer.
  - LCFC will not assist in loading an inappropriate vehicle with LCFC property.
  - LCFC is NOT responsible for ANY damage to vehicles caused by loading, driving on the property, unloading, or storage.
  - LCFC may recommend whether it is safe to load or not load a vehicle, but the final determination lies with the registered owner of the vehicle, along with full responsibility for any damages.
  - LCFC personnel may recommend loading techniques, but are not liable for lost or shifting loads. The driver and/or renter would be responsible to assure load is properly secured prior to transport.
- A refundable security deposit is required to “confirm” your rental, and must accompany this contract. (check or money order ONLY)
  - If all terms of this contract are met, a LCFC check in the amount of the deposit will be returned to you within two weeks of your event (14 days)
- Payment in full is required at pick-up. (Please, check or money order only)
- No tape, glue, **glitter/confetti**, or other sticky substances are to be used on the table or chairs.
- To ensure return of security deposit please complete the following:
  - Return property on the specified day and time
    - Contact LCFC if this must change
  - Return property DRY and CLEAN
  - Return property in the condition it was received
- Every effort should be made to assure that the property is safe from rain and other natural hazards.
- A cancellation notice must be provided 30-days in advance of the event. Failure to give this notice will result in forfeiture of security deposit.
  - Donations are appreciated for cancellations
- **RENTER IS LIABLE FOR ALL DAMAGES TO THE PROPERTY AS DETERMINED BY LCFC.**
  - Any damages which exceed the initial deposit will be assessed to the renters named on prior page of this contract. This includes, but is not limited to, charges for lost or damaged property, cleaning that exceeds “normal wear and tear” (anything that requires more than a wet cloth to remove or mitigate).
- If any provision of this contract is found to be invalid or unenforceable, all other provisions shall continue in full force and effect.
- The undersigned agrees to indemnify, defend and hold harmless all LCFC members and officers from any claims brought by any person or entity arising out of, or related to, this agreement.

The rental Coordinators can be reached by Phone (717-379-4932) or by e-mail ([LCFCrentals@gmail.com](mailto:LCFCrentals@gmail.com)) with any questions or concerns. Prior to your event please allow up to 48 hours for a response.

Please fill in the following, and retain the last page for your records: (this will also serve as your receipt) Requested Pick Up Date and Time: \_\_\_\_\_  
Requested Return Date and Time: \_\_\_\_\_  
Number of Tables \_\_\_\_\_ Number of Chairs \_\_\_\_\_

Deposit Check Amount \_\_\_\_\_ Number \_\_\_\_\_ Payment Check Amount \_\_\_\_\_ Number \_\_\_\_\_