

**UNITARIAN UNIVERSALIST CONGREGATION  
OF THE LOWCOUNTRY**

**BUILDING RENTAL APPLICATION and AGREEMENT  
FOR THIRD PARTY USE**

This form is to be used for requests by persons or organizations **not affiliated** with the UUA or UUCL, but whose purposes are compatible with those of UUCL. It is to be completed when requesting a one-time use, or short-term recurring uses, but NOT as a substitute for a Long-term Rental Agreement.

**Please Print**

**Applicant Information:**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**Group's Primary Information:**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Website \_\_\_\_\_

**Purpose of building use:**

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

Is this a one-time use? \_\_\_\_\_ Or a recurring use? \_\_\_\_\_

Day or dates of requested use: \_\_\_\_\_

Event time of day: Start Time: \_\_\_\_\_ Ends: \_\_\_\_\_

Number of hours (including set-up and clean-up) \_\_\_\_\_

Will a fee be charged, or a donation requested? \_\_\_\_\_

If so, which and how much? \_\_\_\_\_

How many participants are expected? \_\_\_\_\_



## INDEMNIFICATION AND LIABILITY

\_\_\_\_\_ agrees to indemnify and hold harmless UUCL, its officers, directors, employees, and members against any accident, loss or injury which may occur to persons or property during the period of its use of space. It further assumes liability for any damage, theft or breakage of any portion of the building, its contents or grounds by the members, invitees, guests, or attendees and will pay UUCL promptly for any damage done to the building, grounds or contents during the period of use.

**Insurance Endorsement:** A Certificate of Liability Insurance Endorsement may be required and must be provided prior to the event naming Unitarian Universalist Congregation of the Lowcountry as an additional insured. The certificate should indicate in-force liability coverage with limits equal to UUCL insurance policy liability limits.

**Updating application/agreement annually:**

UUCL may require that this application/agreement be updated annually.

Agreement signed by \_\_\_\_\_ Date \_\_\_\_\_

**To be completed by UUCL Office Administrator:**

UUCL Agreement approved by \_\_\_\_\_ Date \_\_\_\_\_

Check:

\_\_\_\_\_ Copy to the Office Administrator and Finance Committee

\_\_\_\_\_ Dates inputted on the UUCL calendar