

HOLD HARMLESS AGREEMENT

BETWEEN THE RIVER VALE BOARD OF EDUCATION
&

Name of Organization

Street Address (no PO Box)

Telephone Number

Type of Organization (Individual, Partnership, Non-Profit Corporation, Public Entity)

In consideration of the use of: _____

on the dates of: _____

for the purpose of: _____

the undersigned agrees to indemnify and hold the River Vale Board of Education and its officers, agents and employees harmless from any and all liability, claims, costs and attorney’s fees arising out of the use of the property referred to above, unless claim is due to the sole negligence of the River Vale Board of Education, officers, agents, and employees.

I understand that this Hold Harmless Agreement also requires that the River Vale Board of Education is indemnified from any losses or damages resulting from the acts or omissions from any guest, participant, visitor or other person attending the event herein referred to, unless due to the sole negligence of the above. Unless waived in writing by the River Vale Board of Education, I agree to furnish a Certificate of Insurance specifically naming the River Vale Board of Education as an additional insured providing general liability, bodily injury and property damage coverage with minimum limits of liability not less than \$1,000,000.00 combined single limit.

Said certificate shall state that “the issuing company shall mail thirty (30) days written notice to the certificate holder named, certified mail return receipt.” It shall also contain a statement acknowledging this Hold Harmless Agreement. No exceptions or limitations will be accepted.

In order to induce the River Vale Board of Education to accept this Hold Harmless Agreement, the following information concerning the intended use of the premises is furnished:

- a. Alcoholic beverages will not be served.
- b. Total number of persons anticipated are: _____
- c. Live entertainment (will) or (will not) be provided.
- d. Other _____

Signed this _____ day of _____ 20__ as the binding act in deed.

Name of Organization

Authorized Signature

Witness

Note: Certificate of Insurance shall be in original form. No photocopies or fax copies shall be accepted. It shall be signed in ink by the authorized representative.