

# Mary, Mother of the Church --- Reservation and Rental Agreement

Today's Date: \_\_\_\_\_

Event: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ Other (cell) phone: \_\_\_\_\_

Email: \_\_\_\_\_

Description of event activities:

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Event Date:

Date(s) needed: From - \_\_\_\_\_ to \_\_\_\_\_

Time needed: From - \_\_\_\_\_ to \_\_\_\_\_

Set-up time: From - \_\_\_\_\_ to \_\_\_\_\_

Room(s) to be used:

|                          |                            |                          |              |
|--------------------------|----------------------------|--------------------------|--------------|
| <input type="checkbox"/> | Parish Hall                | <input type="checkbox"/> | Kitchen      |
| <input type="checkbox"/> | Religious Education Center | <input type="checkbox"/> | Other: _____ |

## All renters must complete the attached forms:

- Diocese of La Crosse Facility Usage/Indemnity Agreement, **AND**
- Certificate of Insurance naming "Mary, Mother of the Church Parish; the Diocese of La Crosse; and Bishop William P. Callahan" as additional insureds, **OR**
- Application for Special Events Coverage insurance (Cost is \$95 per event). The Application for Special Events coverage must be received by the insurance carrier at least 30 days prior to the event and cannot be submitted more than 6 months in advance of the event. **IN ADDITION:**
- **IF** alcoholic beverages (of any type) are to be served or sold, special liquor liability insurance must be secured naming "Mary, Mother of the Church Parish, Diocese of La Crosse, and Bishop William P. Callahan" as additional insureds. A copy of the Certificate of Insurance must be presented to the parish two weeks prior to the event or alcohol may not be served.

Rental Fees:

- A. Parish Events and Parish Organizations of Mary, Mother of the Church (including funeral luncheons and baptism luncheons). For Category "A", there are no fees or special forms required.
- B. Registered parishioners of Mary, Mother of the Church
- C. Diocese of La Crosse and Catholic organizations (i.e. as named in the Official Catholic Directory)
- D. Not-for-Profit organizations with missions that agree with Catholic teaching

| <b>Category:</b>                   | <b>A</b> | <b>B</b> | <b>C</b> | <b>D</b> |
|------------------------------------|----------|----------|----------|----------|
| Parish Hall rental*                | \$0      | \$100    | \$200    | \$300    |
| Religious Education Center rental* | 0        | 100      | 200      | 300      |
| Coffee Service                     | 0        | 25       | 50       | 100      |
| Use of Kitchen Equipment**         | 0        | 50       | 100      | 200      |
| Use of Kitchen Equipment**         | 0        | 50       | 100      | 200      |

\*Rental Fee covers utilities and parish attendant for 4 hours. Any time over 4 hours is an additional \$25 per hour (any partial hour is considered a whole hour).

\*\*A caterer – to be approved by the parish – may use designated kitchen equipment for warming, holding, and serving prepared food (i.e. warming/holding oven, upright refrigerator, upright freezer, chafing/serving dishes, sinks). For additional fees, separate arrangements may be made for the use of other kitchen equipment (i.e. stove, ovens, fryers, walk-in refrigerator, dishwasher), and/or dishes, and silverware.

Rental Fees:

Parish Hall Rental Amount: \_\_\_\_\_  
 Add'l Time over 4 hrs. Amount: \_\_\_\_\_  
 Religious Ed. Center Rental Amount: \_\_\_\_\_  
 Coffee Service Amount: \_\_\_\_\_  
 Use of Kitchen Equipment Amount: \_\_\_\_\_  
 Use of Dishes & Silverware Amount: \_\_\_\_\_  
 TOTAL: \_\_\_\_\_

Security Deposit (same as rental fee): \_\_\_\_\_

Other Information: \_\_\_\_\_

Seating Request: \_\_\_\_\_

Use of TV Monitors/Microphone: \_\_\_\_\_

Religious Ed. Rooms: \_\_\_\_\_

Food/Snacks being brought in: \_\_\_\_\_

Buffet Tables/Head Tables: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parish Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**Diocese of La Crosse Facility Usage/Indemnity Agreement**

PARISH: \_\_\_\_\_  
(PARISH is understood to include the Diocese of La Crosse)

VENDOR: \_\_\_\_\_

TYPE OF VENDOR: \_\_\_\_\_

DATES OF USE: \_\_\_\_\_

The above named VENDOR agrees to defend, protect, indemnify, and hold harmless the above named PARISH against and from all claims arising from negligence or fault of the above named VENDOR or any of its agents, family members, officers, volunteers, helpers, partners, organizational members, or associates in connection with the operations of the above named VENDOR at the above named PARISH.

VENDOR agrees to provide a certificate of insurance to the PARISH, which provides evidence of general liability coverage of not less than two million dollars (\$2,000,000) per occurrence. VENDOR also agrees to have the PARISH named as an “**Additional Insured**” on its general liability policy for the DATES OF PARISH EVENT in relationship to the VENDOR’S activities. It is agreed that VENDOR also agrees to ensure that its liability insurance policy will be primary in the event of a covered claim or cause of action against PARISH.

**If and only if** VENDOR fails to comply with the above (second) paragraph, then VENDOR agrees to protect, defend, hold harmless, and fully indemnify the above named PARISH for any claim or cause of action whatsoever which takes place during the above identified DATE(S) OF USE that is brought against the PARISH by the above named VENDOR or its employees, agents, guest, invitees, customers, partners, family members, organizational members, and associates, even if such claims arise from the alleged negligence of the PARISH, its employees or agents or the negligence of any other individual or organization not a party to this agreement. If any paragraph or sentence of this agreement is held invalid, it is agreed that the balance thereof, shall continue in full legal force and effect.

SIGNED BY: \_\_\_\_\_  
(Must be an official agent of VENDOR)

NAME AND TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

(REV 7/19/18)

DIOCESE OF LA CROSSE, WI - 0030
APPLICATION FOR SPECIAL EVENTS COVERAGE

Coverage Limit: \$1,000,000 Combined Single Limit Bodily Injury and Host Liquor Liability, \$500,000 Property Damage Liability. Includes \$100,000 for Defense Costs for Sexual Misconduct, excluding overnight events (see below for purchase options).

Coverage provided is per event (not per claim). Submission of application does not bind coverage - all events are subject to approval.

Coverage underwritten by Nationwide Mutual Insurance Company; Policy No. on file with C.M.G. Agency, Inc.

Cost of Coverage: \$95 Per Event (Overnight Stays - \$125)

TO AVOID DELAY OR DENIAL OF COVERAGE, PLEASE ENSURE THAT EVERY FIELD IS COMPLETED.

Name of Parish or Institution:

Date of Event:

Street (Physical) Address (NO P.O. BOXES):

Type of Special Event (Example: wedding reception, anniv. party, etc. If it's a FUNDRAISER, be specific about what is occurring):

City/State: ZIP Code:

Phone No.:

Time of Event: From To

Lessee (Additional Insured) Information:

Is this an overnight event?

Name of Sponsoring Organization or Individual Requesting Coverage

Yes No

(Please Print Lessee Name(s) or Organization)

Approx. Number of Participants:

Lessee (Additional Insured) Contact Person

Is Food Being Served?

Name:

Yes No

Street Address:

Is Liquor Being Served?

City/State: ZIP Code:

Yes No

Telephone:

If liquor is to be sold (or cost included in ticket price) and/or a license or permit is required in order for you to serve or furnish alcohol, you must obtain LIQUOR LIABILITY coverage by separate application.

Does this event require the additional coverage? Yes No

To receive approval notification please print e-mail(s):

(Please Print E-mail(s) Clearly)

To Note: If liquor liability coverage is NOT purchased and an alcohol related claim results, the claim will be excluded if it is determined that a liquor liability policy should have been purchased.

COVERAGE DOES NOT APPLY TO CERTAIN EVENTS, SUCH AS, BUT NOT LIMITED TO:

- Any carnival event
Fireworks & fireworks displays
Events involving 'BYOB' (Bring your own bottle)
Events involving pool or lake activities
Events involving recreational vehicles
Rap/Hip-Hop/Alternative music (non-religious bands)
Events organized or operated by professional promoters/performers
Organized sporting events, including tournaments & camps (some sporting activities are allowed and must be pre-approved).
Events where a fee or admission is charged, unless all proceeds go to charity
Political Rallies
Amusement rides, including mechanically operated devices, trampolines, & rebounding devices

DEFENSE COSTS FOR SEXUAL MISCONDUCT FOR OVERNIGHT EVENTS - \$100,000 LIMIT

Coverage does not automatically apply for overnight events, however, you have the option to purchase this coverage by separate application. Additional charge may apply.

Do you want to apply for this coverage? Yes No

ADDITIONAL CHARGES WILL APPLY FOR:

- Events which exceed 3 days in duration (charge TBD)
Inflatable Amusement Device (Must be pre-approved, picture required. Minimum charge of \$100 per inflatable applies; each device is underwritten; charge is determined by size and potential risk.)
Events that exceed 1,000 in attendance (charge TBD)

COMPLETE AND RETURN FORM TO:

CATHOLIC MUTUAL GROUP
ATTN: MS. KRIS TWINING
PO BOX 44983
MADISON, WI 53744-4983
FAX: (608)833-3794
E-MAIL: ktwining@catholicmutual.org