

## HOLD HARMLESS AGREEMENT

Hold Harmless and Use Agreement made and entered into this \_\_\_\_\_ (date) by and between

### GOODRICH AREA SCHOOLS

8029 S. Gale Rd.  
Goodrich, MI 48438

And **User:**

---

---

---

The User will be permitted access to the School District on \_\_\_\_\_ (date) and \_\_\_\_\_ (time) and will agree to follow any and all rules governing use of the School District facilities and any specific guidelines or restrictions at the sole discretion of the School District. (attached).

The specific location of any use shall be subject to the School District's discretion and the User will be responsible for all expenses related to its presence at the School District.

The User agrees to indemnify and hold harmless the School District, its boards, employees, and representatives from any and all claims, actions, suits, and judgments and expenses including claims, costs, attorney fees and damages in connection with its activities resulting in loss of life, bodily or personal injury, sickness or disease, product liability claims and/or damage to property arising from or out of use by the User or its agents, members, partners, associates or employees, of any portion of the School District.

The User shall, at its own expense, keep in full force and effect until the cessation of its activity a policy of public liability and property damage insurance with respect to the School District having limits of not less than One Million Dollars (\$1,000,000) for each occurrence and aggregate, including bodily or personal injury, product liability, if applicable, and property damage, with the School District named as an Additional Insured for the period of the activity. Automobile liability coverage of at least One Million Dollars (\$1,000,000) may also be required depending on the circumstances. The User agrees to provide proof of such insurance to the School District at least 24 hours in advance of the scheduled activity.

User Name \_\_\_\_\_

Authorized Representative \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

### Goodrich Area Schools

Authorized Representative \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_