



**AGREEMENT TO HOLD AN EVENT
AT THE INNSBROOK HISTORICAL SOCIETY LOG CABIN**

The undersigned seeks permission to hold an event at *The Innsbrook Historical Society Log Cabin* on (date) _____ from (time) _____ to _____.
The purpose of the event is: (birthday party, family reunion, dinner with friends, etc.)
_____.

Specify whether event is for: __ cabin, __ pavilion, or __ both.

The undersigned understands the premises contains a log cabin restored to the 1840's era and various out buildings that are either also restored or in the process of being restored, and the premises is a natural, hilly, rocky, uneven, dirt and vegetation covered terrain, and anyone coming onto the premises for purposes of this event does so at their own risk of any injury. The undersigned agrees to the foregoing, and agrees to advise anyone attending this event of the foregoing.

No smoking is permitted in or around the log cabin or anywhere on the premises. The undersigned agrees to be liable and responsible for any damage caused by smoking at this event. No fires are permitted in or around the log cabin or anywhere on the premises, except a charcoal or propane fire contained in a suitable barbeque pit or a sterno-type chafing dish.

The undersigned agrees to be responsible for having the premises cleaned after the event and restored to the condition prior to the event, and to remove all trash from the premises. A surcharge will be assessed if the property is left unclean.

In consideration for the privilege of having this event at the cabin site, the undersigned releases *The Innsbrook Historical Society* from any liability for injury to person and/or damage to property, whether due in whole or in part to the negligence of *The Innsbrook Historical Society*, including, but not limited to injury or damage to person or property caused by the consumption of alcohol, any type of fires and smoking on the premises, and to hold harmless and to fully indemnify *The Innsbrook Historical Society* against any such claim suit or judgment, including the cost of defense.

APPLICANT REPRESENTATIVE

DATE: _____

PHONE: _____

EMAIL: _____

IHS REPRESENTATIVE

IHS CONTACT PERSONS: DAN WEST – 636-745-8840
CHUCK MAGNUSON – 314-276-6491
JOHN WELTER – 636-745-7599

dan@dan-west.com
magnuson.chuck@gmail.com
johnwelter@centurytel.net