**Special Agreement for use of**

**Inflatables, Mechanical Rides and Dunk Tanks on Metropark Property**

**This form must be completed by the supplier of equipment that will be included in the**

**Group Picnic/Special Event Application**

Name of Group Picnic/Special Event Applicant:

Name of Supplier of Equipment:

Address of Supplier:

Phone/E-mail of Supplier:

Date of Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Metropark/Area:

**RELEASE OF LIABILITY**

To the fullest extent permitted by law, the above supplier of equipment agrees to defend, pay on behalf of, indemnify, and hold harmless the Huron-Clinton Metropolitan Authority, it’s elected and appointed officials, employees, agents and volunteers, and others working on behalf of the Huron-Clinton Metropolitan Authority against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claims, or recovered against or from the Huron-Clinton Metropolitan Authority, by reason of personal injury, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of, or is in any way connected or associated in whole or in part with the supplying organization’s equipment. By signing below, I state that I have authority to sign this document on behalf of the supplying organization.

**Supplier’s Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CERTIFICATE OF INSURANCE AND ENDORSEMENT**

Supplier agrees to provide the following insurance: Commercial General Liability insurance on an Occurrence basis with limits of liability not less than $1,000,000 per occurrence and aggregate. Coverage shall include an endorsement naming Huron-Clinton Metropolitan Authority as additional insured. It is understood and agreed that by naming Huron-Clinton Metropolitan Authority as additional insured, coverage is considered primary and non-contributory with any other insurance Huron-Clinton Metropolitan Authority may have. Supplier must provide a certificate of insurance and endorsement, which evidences such coverage, and shall include the specific name and date of the event on the certificate. This information must be delivered to the Park Superintendent not less than one (1) week before the event.

**FOR PARK USE ONLY**

**Park Manager/District Superintendent Signature: Date:**