

Odessa School District #105

PO Box 248 Odessa, WA 99159

Superintendent
Dan Read
(509) 982-2668
FAX (509) 982-0163
www.odessa.wednet.edu

K-12 Principal
Jamie Nelson
(509)982-2603 Elementary
(509)982-2111 Secondary

Board of Directors
Ed Deife
Heather Valverde
Christine Crossley
Janie Steward
Carmen Weishaar

WAIVER-HOLD HARMLESS AGREEMENT

WHEREAS, The Odessa School District No. 105, 157, 166J

(hereinafter District) own a _____ and
(designate facility)

The District does not utilize the facility 100% of the time. Further, whereas,

_____, the undersigned, desires to utilize the facility for the purposes
(name of person)

and uses: _____
(list the purpose and/or use)

And day and time of use: _____.

NOW, THEREFORE, it is mutually agreed that:

The District shall allow the undersigned to utilize the facility hereinabove listed at the times and for the purposes stated above.

The undersigned agrees to assume and hold the District harmless for any and all liability, injury or damages to the person and/or property of the undersigned, or any other person or entity which is caused or arises from or is due to the undersigned's use of the District's facility. The undersigned agrees to utilize the facility hereinabove specified in a reasonable and safe manner and in a manner, which is appropriate for the use of the type of facility.

The undersigned agrees to assume responsibility for and reimburse the District for the costs of repair or replacement of any District property damaged during the undersigned's use of the facility hereinabove designated. Said responsibility shall include, but not be limited to damages for improper use of the facility, neglect of the undersigned, failure to properly supervise participants, or any other cause arising from, due to, or caused by the undersigned's use of the facility.

The user will be required to procure at its own expense a Comprehensive General Liability insurance policy, naming the District as an additional insured. This policy shall be primary and written with limits of \$1,000,000 combined single limits per occurrence. Coverage amount cannot be canceled or reduced without three days written notice to the District.

THE DISTRICT DISCLAIMS ALL LIABILITY TO THE UNDERSIGNED OR OTHER PERSONS AND ENTITIES FOR THE CONDITION OF THE FACILITY AND EXPRESSLY MAKES NO WARRANTY AND DISCLAIMS ALL WARRANTIES AS TO THE CONDITION OF THE FACILITY OR THE FACILITY'S FITNESS FOR USE, INCLUDING THE USE FOR WHICH THE FACILITY IS COMMONLY UTILIED AND/OR THE USE INTENDED BY THE UNDERSIGNED.

The undersigned agrees to abide by the rules and regulations governing the use of said facility. The undersigned further accepts receipts of a listing of said rules and regulations as adopted by the Odessa School Board of Directors.

DATED this _____ day of _____, 20____.

(User – if a minor, must also be signed by guardian)

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Compliance Statement for HB 1824, **Youth Sports-Head Injury Policies** and SB 5083, **Sudden Cardiac Arrest Awareness**.

(attach to any building/facility use request form)

_____ requests the use of Odessa School District facilities for the following date(s): _____.

_____, a private non-profit youth sports group, verifies all coaches, athletes and their parent/guardian have complied with mandated policies for, the **Management of Concussions and Head Injuries** as prescribed by HB 1824, section 2 and **Sudden Cardiac Arrest Awareness** as prescribed by SB 5083, section 3.

Attached is a proof of insurance Comprehensive General Liability insurance policy, naming the District as an additional insured. This policy shall be primary and written with limits of \$1,000,000 combined single limits per occurrence. Coverage amount cannot be canceled or reduced without three days written notice to the District.

Signed:

_____ Date: _____
Representative of Private Non-Private Youth Sports Group

Note: Access to school facilities may not be granted until all requirements of this application are complete and approved by the school district &/or designee.