

## Indemnity Form

Organisation/Club:

As the duly authorised representative of the above, I agree that:

1. Salisbury City Council will not be liable for the death or injury of any person attending the Site/Facility for the subject of the hiring, or for any losses, expenses or other costs incurred by the Hirer except where such death, injury or loss is due solely to the negligence of the Council or anyone authorised on its behalf.
2. Salisbury City Council will not in any circumstances accept responsibility or liability in respect of any damage to or loss of any goods, articles or property of any kind brought to or left at the Site/Facility either by the Hirer or by any other person, unless this is due to the negligence of Salisbury City Council.
3. The Hirer is not to cause any damage to be done to the Site/Facility and - except to the extent that the Council may be indemnified by insurance - the Hirer is to make good and pay for any such damage caused by any act or neglect of the Hirer; of anyone for whom the Hirer is responsible; or of anyone permitted by the Hirer to enter the Site/Facility.
4. The Hirer shall be responsible for any losses, expenses or other costs as are mentioned in the above clauses and shall maintain a policy of Public Liability insurance in the minimum sum of £5m in respect of any one incident to cover such responsibility.
5. The Hirer will, on request by the Council, immediately produce to the Council a certified copy of its insurance policy taken out for the purposes of this Indemnity and satisfactory evidence that the premium has been paid and is up to date.

<b>Site/Facility to be used:</b>	
<b>Type of use:</b>	
<b>Date/s of use:</b>	

**Agreed & signed by Hirer:**

<b>Name:</b>			
<b>Address:</b>			
<b>Contact number/s:</b>			
<b>Signed:</b>		<b>Date:</b>	

**For Office Use only:**

<b>Insurance cover seen:</b>		<b>Policy number:</b>	
<b>Indemnity limit:</b>	£	<b>Renewal date:</b>	
<b>Name &amp; address of insurance company:</b>			