

St. Bartholomew Catholic Church  
6900 River Road, Bethesda Md. 20817  
[www.stbartholomew.org](http://www.stbartholomew.org)  
301-229-7933

**Request and Agreement for Reddy Center Use**

In return for using the St. Bartholomew Catholic Church's Reddy Center, the undersigned agrees to obey every law, observe every safety precaution and practice, take every precaution against fire, and assume every responsibility and liability for all participants in his/her group, including organizers, members and guests of the group.

The undersigned is at least 21 years old, and all members of their group are at least 21 years old or will be supervised by someone of age 21 years or older.

The undersigned agrees to leave the Reddy Center in a clean condition, including using the dust broom available to clean the floor after use. All items brought into the Reddy Center must be removed by the end of the group's scheduled use. It is the responsibility of the undersigned to inspect the Gym prior to use and to report any damage to the school principal.

The undersigned and his/her group agrees to hold harmless St. Bartholomew, its officers, parishioners and employees against any claim for damages or personal injury to the using group, its employees, guests, invitees or others resulting from occurrences arising from your use of the Reddy Center.

Your group is encouraged to make a voluntary contribution to the Reddy Center Building Fund, at your discretion, or you can use the guideline of \$5 per person, per use, which can be donated at the School Office.

St. Bartholomew Catholic Church reserves the right to decline usage of the gym in its sole discretion.  
St. Bartholomew Catholic Church reserves the right to alter or cancel agreed upon usage dates in its sole discretion.

Complete the following and return to St. Bartholomew, attn: School Office.

Today's Date \_\_\_\_\_

Group or Individual Requesting Use: \_\_\_\_\_

Date(s) Requested \_\_\_\_\_ Time: From \_\_\_\_\_ To \_\_\_\_\_

One Time Use ( )    Ongoing Use ( )    Number of people in the group \_\_\_\_\_

Purpose \_\_\_\_\_

Contact Person / Person Responsible for Use (print clearly) \_\_\_\_\_  
(Must be of age 21 years or older)

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ E-Mail \_\_\_\_\_

Alternate Contact: Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature of the party responsible for this event \_\_\_\_\_ Date \_\_\_\_\_

**Procedure**

- Fill out this Request and Agreement for the Reddy Center and return to the School Office.
- Within seven days you will be informed if the Reddy Center is available.
- Prior to your date of use, arrange with the School Office to receive the key and a Gym Use Permit.

**For Office Use Only**

Date the Request is Received ..... By whom? .....

Date request is approved ..... Patron Informed .....

Floor Mats needed.....

Damage Deposit Received..... Amount ..... Date .....

Waived .....

Recommended Contribution Received..... Amount ..... Date .....