**HALE CHAPEL HALL & JOHN CLARKE ROOM**

335 HALE ROAD, HALE BARNS, ALTRINCHAM WA15 8SS

**SINGLE EVENT HIRE - COUNTER INDEMNITY**

|  |  |
| --- | --- |
| NAME OF HIRER |  |
| ADDRESS INC POSTCODE |  |
| MOBILE |  |
| EMAIL |  |
| DATE OF EVENT |  |
| NATURE OF EVENT |  |
| NUMBER OF PARTICPANTS |  |

We/I the undersigned agree to indemnify the Trustees of Hale Chapel against any claims/damages arising out of the use of the Chapel Property in respect of personal injuries or loss/damage to property.

Furthermore We/I agree to indemnify the Trustees of Hale Chapel in respect of damage/loss to the Chapel Property arising out of negligence of the Hirer and/or their Invitees.

SIGNATURE

DATE

Return completed forms to [halechapelhall@btinternet.com](mailto:halechapelhall@btinternet.com)

or Hale Chapel Hall, 335 Hale Road, Hale Barns, Altrincham WA15 8SS