



One Detjen Drive  
Crestwood, MO 63126  
(314) 729-4700

**OFFICE OF THE CITY CLERK**

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**MEETING ROOM PERMIT**

Application Date: \_\_\_\_\_

Group Name: \_\_\_\_\_

Description of Event/Purpose of Meeting: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date/s of Event: \_\_\_\_\_ Time/s of Event: \_\_\_\_\_

Request for use of:                    \_\_\_\_\_ Board of Aldermen Chambers (Auditorium)  
    \_\_\_\_\_ Fire Department Training Room

Approximately \_\_\_\_\_ people are expected to attend

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

No liability, either express or implied, will be incurred by City, its agents, servants, and employees, arising out of the use of the premises by permittee, its agents, servants, employees, assigns, successors, invitees and licensees, during the date and time specified above. Permittee agrees to indemnify and save harmless the City, its agents, servants, employees, from and against any and all liability for damages arising from injuries to persons or damage to property occasioned by any acts or omissions of the above named group.

Its agents, servants or employees, including any and all expense, legal or otherwise, which may be incurred by City or its agents, servants or employees, in defense of any claim, action or suit, irrespective of any claim that an act, omission or negligence of the city or its agents, servants or employees contributed to such injury or damage.

I also agree to be responsible for securing the meeting area after our use and for any damages incurred in any manner during the period that I occupy the premises.

I have read, understand and agree to the attached Policy and Procedures for use of the Meeting Rooms at the Government Center.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

