



INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

(" Agreement") made as of this ___ day of ____ 20___, by and between the County of Hudson, a body corporate and politic of the State of New Jersey, having offices at 567 Pavonia Avenue, New Jersey 07306 ("County" or "owner") and Organization and /or Vendor.

Name of Organization or Vendor _____

Address of Organization or Vendor _____ (No P.O. Box)

Phone Number or Email Address- _____

Type of Organization- _____
(Individual, Partnership, Non-Profit Corporation, Corporation, Public Entity)

In consideration for the use of _____ on the following

Dates: _____

For the Purpose of: _____

The Organization or Vendor agrees to Indemnify and Hold the County of Hudson and its officers, agents, and employees harmless from any and all liability, claims, costs and attorney's fees arising out of the use of the property referred to above.

I understand that this Hold Harmless Agreement also requires the County of Hudson is indemnified from any losses or damages, resulting from the acts or omissions from any guest, participant, visitor or other person attending the event herein referred to.

Unless waived in writing by the County of Hudson. I agree to furnish a Certificate of Liability Insurance specifically naming the County of Hudson as an Additional Insured providing General Liability Coverage (including bodily injury and property damage with minimum limits of liability not less than \$_____, in order to induce the County of Hudson to accept this Indemnification and Hold Harmless Agreement. The following information concerning the intended use of the premises is furnished.

Alcoholic Beverages-- Will not be served

Live Entertainment-- Will or Will Not be provided

Total Number of person(s) anticipated is _____

Other _____

This indemnification and Hold Harmless Agreement shall remain in full force and effect for any continued, additional or postponed date for the event indicated.

The County of Hudson reserves the right to cancel or interrupt the event if the representations set forth herein are not adhered too or if the County of Hudson determines that a situation might result in personal injury, property damage or violation of law exists.

Authorized Signature - _____

Print Authorized Name - _____

Print Title- _____

Organization Name- _____

Witness Signature- _____

Date Signed - _____