

**Mary, Gate of Heaven Parish
Saint Mary Parish Center Property
45 Church St.
Windsor Locks, CT 06096**

TERMS AND GENERAL INFORMATION

WE REQUEST ALL TO READ THE BELOW TERMS AND CONDITIONS BEFORE BOOKING A DATE. IF YOU WISH TO RENT OR HAVE ANY QUESTIONS PLEASE CALL **JUDITH FRITZ AT (860) 623-5020**.

RENTAL FEES: (Four-hour increments)	REGISTERED PARISHIONERS	Windsor Locks Non-Profit ORGANIZATIONS
MAIN HALL/GATHERING SPACE	\$300.00	\$400.00
MEETING ROOMS	\$ 60.00	\$ 90.00
SECURITY/DAMAGE/ EXCESSIVE CLEANUP DEPOSIT	\$300.00	\$500.00
LIABILITY INSURANCE	\$110.00	\$110.00
Kitchen	\$100.00	\$200.00

WEEKEND SET UP (by maintenance if required) \$30.00 per hour.

1. DEPOSIT: A one-half deposit is requested at the time of booking with the contract and the remainder is payable **30 DAYS AFTER BOOKING EVENT and/or 2 WEEKS before EVENT** whichever date occurs first. If cancellation occurs within 24 hours of event, a \$100 fee is charged.

- **Please note:** The renter is responsible for any excessive damage to the building, contents, and property incurred during the rental. If no damage, check will be refunded.
- Make Deposit check payable to **MARY, GATE OF HEAVEN PARISH**. A separate Rental check is needed.

1. LIABILITY INSURANCE: Individuals renting the hall **MUST HAVE** liability insurance coverage. Most organizations have this coverage through their insurance agent. Individuals can purchase for \$110 a one-event coverage through the Archdiocese of Hartford (see application form). Coverage must be for \$ 1,000,000 and ensures the individual holding the event against any possible liability claims, including liquor liability (if served}. This certificate of insurance must be presented 15 days before the event to the Center Administrator. The sale of alcoholic beverages is not allowed without a state permit. Make check payable to the **ARCHDIOCESE OF HARTFORD**.

2. LIABILITY INSURANCE FOR ORGANIZATIONS: Most organizations have this coverage through their insurance agent. Individuals can purchase for \$110 a one-event coverage through the Archdiocese of Hartford (see **application form**). The Coverage of insurance in the amount of \$1,000,000 general liability coverage. In the description section of the certificate must state: **Mary, Gate of Heaven Parish Corporation, and the Hartford Roman Catholic Diocesan Corporation** are listed as additional insured. The date of the event and St. Mary Parish Center as the place of the event should also be listed on the certificate. This certificate of insurance must be emailed **15 days before** the event to Catholic Mutual Group office at Elena Kollar EKollar@catholicmutual.org and CC Robin Holtsclaw, Operations Manager RHoltsclaw@catholicmutual.org and Robert Costantiello, Claims Risk Manager RCostantiello@catholicmutual.org

3. ARRIVALS AND DEPARTURES: You may have access to the hall up to 30 minutes before the start of your event and 30 minutes for cleanup. **ALL EVENING EVENTS INCLUDING CLEAN UP MUST CONCLUDE by 9:00 PM**. This means the renters' event must end by **8:00 PM** and the renter gets 1 hour for clean-up. **ALL PERSONS MUST BE OUT OF SAINT MARY PARISH CENTER BY 9:00 PM**. If you feel more time is needed, please contact our Center Administrator.

4. SPECIAL NOTES:

- We have the right to accept or reject any booking request.
- St. Mary Parish Center is not available for pre-wedding or wedding receptions.
- There is no charge to Mary, Gate of Heaven parish groups doing parish-sponsored events, classes, and meetings.
- Rental fees are not applicable for parishioners for funeral receptions. (Donations appreciated)
- If renting the conference room and also using a meeting room, rental rates for all areas being used must be purchased.
- St Mary Parish Center hall is not responsible for misplaced items.
- Bookings will not be confirmed until the Center Administrator confirms it.

Initial: _____ Date: _____

Updated 9/2026

FACILITY USAGE/INDEMNITY AGREEMENT

PARISH: MARY, GATE OF HEAVEN PARISH CORPORATION

PARISH is understood to include the Arch/Diocese of _____

FACILITY USER: _____

DATES OF FACILITY USAGE: _____

TYPE. OF FACILITY USAGE: _____

The above named FACILITY USER agrees to defend, protect, indemnify and hold harmless the above named PARISH against and from all claims arising from the negligence or fault of the above named FACILITY USER or any of its agents, family members, officers, volunteers, helpers, partners, organizational members or associates which arise out of the above identified FACILITY USAGE at the above named PARISH.

FACILITY USER agrees to provide a certificate of insurance to the PARISH, which provides evidence of general liability coverage of not less than one million dollars (\$1,000,000) per occurrence. FACILITY USER also agrees to have the PARISH named as an "Additional Insured" on its general liability policy for the DATE(S) OF FACILITY USAGE in relationship to the TYPE OF FACILITY USAGE for claims which arise out of FACILITY USER'S operations or are brought against the PARISH by FACILITY USER'S employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates. FACILITY USER also agrees to ensure that its liability insurance policy will be primary in the event of a covered claim or cause of action against PARISH.

If FACILITY USER fails to comply with the above (second) paragraph, then the above named FACILITY USER agrees to protect, defend, hold harmless, and fully indemnify the above named PARISH for any claim or cause of action whatsoever arising out of or related to the usage which takes place during the above identified DATE(S) OF FACILITY USAGE that is brought against the PARISH by the above named FACILITY USER or its employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates, even if such claim arises from the alleged negligence of the **PARISH**, its employees or agents, or the negligence of any other individual or organization. This paragraph does not relieve FACILITY USER's responsibility to comply with the above (second) paragraph.

If any sentence or paragraph of this agreement is held invalid, it is agreed that the balance thereof shall continue in full legal force and effect.

SIGNED BY: _____
(Must be an official agent of FACILITY USER)

NAME (Please print): _____

DATE: _____
FACUSAG (5110)

Updated 9/2026

Mary, Gate of Heaven Parish
Saint Mary Church Hall Property
42 Spring St, Windsor Locks, CT 06096
Website: www.stmarystrobertwl.org
PARISH ROOM USE/RENTAL AND LIABILITY CONTRACT

Name of Group/User _____ Event _____ Event Date (s): _____

Start time: ____ ☐ AM ☐ PM End Time: _____ ☐ A.M. ☐ PM MUST INCLUDE SET-UP AND CLEAN-UP TIME

Contact Name: _____ Phone #: _____

Fax #: _____ E-MAIL: _____

Address: _____ Town/City _____ State: _____ Zip Code _____

Alternative Contact: _____ Phone #: _____ E-MAIL: _____

Room (s) Requested: _____ Number of Attendees: _____

Age Group: _____ Fees Charged ☐ Yes ☐ No NOTE: If alcoholic beverages are to be sold, a copy of the license must be submitted with this contract. Received: ☐ Yes ☐ No

Number of People to attend the event (approx.) _____

FEES & CHARGES

I agree to pay the fees charged per the Fees & Charges listed in TERMS AND GENERAL INFORMATION.

I understand that all charges are by a full hour of use including set-up and clean-up. Users, attendees, and/or contracted entities arriving before or staying beyond the scheduled time will incur additional hourly fees. _____ (Initial)

Hall Fee: \$ _____ * Rental fees do NOT include required Refundable Security Deposit of \$250.00
Meeting Rm Fee: \$ _____ Insurance for Community Room rentals.
Deposit Fees: \$ _____

The deposit will be refunded within 30 days following the event provided no additional charges, damage or excess cleaning was required.

TOTAL CHARGES: \$ _____ - Deposit: \$ _____ = BALANCE DUE: \$ _____ DATE DUE: _____

LIABILITY INSURANCE: ☐ Yes ☐ No We must have a copy of the Insurance one week prior to Event

Please make Rental and Deposit checks payable to: Mary, Gate of Heaven Parish

(See Below)

Payment in full is required with a signed contract to book St. Mary Parish Center.

PAYMENT IN FULL PLUS REFUNDABLE DAMAGE/CLEANING DEPOSIT ON ROOM RENTALS ARE DUE 30 DAYS BEFORE THIS EVENT DATE.

PLEASE NOTE: RENTER IS REPSONSIBLE FOR ANY EXCESSIVE DAMAGE TO BUILDING, CONTENTS, AND PROPERTY INCURRED DURING THE RENTAL.

Renter Signature _____ Date: _____

Center Coordinator signature _____ Date: _____

MARY, GATE OF HEAVEN PARISH

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USE OF DECORATIONS & CLEANUP POLICY

1. Nothing is to be put on the walls in St. Mary Parish Center. The use of tape, thumbtack, and nails are strictly prohibited.
2. Items may not be attached to ceilings due to the complexity of the ceiling, lights, and sprinkler system.
3. Due to fire hazards, the use of candles or tea lights are PROHIBITED. Building Users are encouraged to use battery-operated *candles*.
4. No fire exit may be blocked by any decoration, table, chair, platform, etc.
5. Balloons may be used in the public areas of the facility. Balloons must be weighted down. However, all balloons and ribbons/strings must be removed at the end of the event. **DO NOT RELEASE BALLOONS IN THE HALL. Any balloons which are found wrapped around ceiling fans or in the ceiling loft will result in loss of SECURITY DEPOSIT. No Silly String is allowed.**
6. The use of confetti is **prohibited**. Rice may **not be thrown** in or around the facility; however, birdseed may be used outside on grass areas only, not on the patio.
7. The use of a Fog Machine is **prohibited**.
8. All decorations and mounting materials must be removed in their entirety at the end of usage of the facility. *(Only mounting clay can be used on painted or wallpapered surfaces including walls, window frames, doors, etc. Mounting materials which would harm the facility are not allowed.)*
9. String lighting and/or any other decoration(s) that must be plugged in must be previously approved by the Building Coordinator, Facilities Supervisor, and/or Custodian. *(Building Users are encouraged to use battery-operated string lighting and decorating devices.)*
10. All decorative materials, paper tablecloths, plates, etc. must be disposed of in plastic garbage bags provided and put into the outdoor trash barrels located outside the main hall. The kitchen is expected to be left as clean as you found it. You will have access to the kitchen utility room for the cleanup of spills and brooms can be found there.
11. All areas rented are expected to be left as clean as you found them.

Initial: _____ Date: _____

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GENERAL INFORMATION

1. SEATING CAPACITY: Maximum 65 for the hall (lecture-style seating) and 40 for dinner seating. Rectangle tables (seating up to 6) and rectangular tables are available.

Meeting rooms: Seat approximately 12 people. Renters MUST USE the provided tables and chairs. No extra tables and chairs can be brought in without the permission of the Hall Coordinator.

Due to state and local Fire Codes, we cannot exceed these numbers. Noncompliance will prohibit future rentals.

2. DECORATIONS and CLEANUP: Please see USE OF decorations/cleanup policy.

3. ACCESSIBILITY: The Parish Center will be opened and closed by Hall Coordinator or parish staff. Contact information for problems and/or emergencies and/or heating and AC systems is posted next to the kitchen door going into the hall. These names are also listed on your contract copy. Please adhere to the times agreed upon in the contract.

4. ST. MARY PARISH CENTER IS A NON-SMOKING FACILITY.

5. Mary, Gate of Heaven council members reserve the right, at our sole and absolute discretion, to change, modify, add or remove portions of these terms at any time without notice' and unless otherwise indicated, such changes will become effective immediately; therefore, please check these terms periodically for changes. Your continued use of the www.stmarystrobertwl.org website following the posting of changes to this Usage Agreement will mean you accept those changes. Please print and retain a copy of this Usage Agreement for your records, as it has been changed from time to time.

Initial: _____ Date: _____