**AFFIDAVIT**

This is to certify that I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned will be renting the facility at **HSNC** to hold a private party for myself on \_(Date)\_ for approximately \_?\_ guests. I agree to provide adequate insurance coverage endorsed to HSNC protecting HSNC from any and all damages, claims, or consequences caused due to any of activities on or off the premises due to my event at HSNC. Coverage include but not limited to: General liability, Property damage, Fire damage, Personal in jury or death, Medical expense, Liquor liability, Thefts and/or any other damage. I may buy such insurance from an independent insurance agent or I may be covered under my home insurance policy. Failure to provide such insurance automatically holds me personally responsible and accountable for any of the damages or claims listed above and/or not listed above.

I agree to defend, hold harmless and indemnify HSNC and its officers, employees, affiliates, and agents without any limitation from and against any and all claims, damages, loss, injuries (including disabilities or deaths), costs, legal fees and expenses in any way arising or connected with any activities, food, public safety, etc, whatsoever, including claims by third parties.

The undersigned shall also be responsible for hiring adequate staff for monitoring the event to occur peacefully and professionally and for all cleanup, busing tables, and trash removal. HSNC is not responsible for the cleanup of food, beverage, tables, or the room.

I certify under penalty of perjury under the laws of the North Carolina and the United States of America that this statement is true and correct and binding on me.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a Notary Public for said County and State, do hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witnesses my hand and official seal, this the \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

(Official Seal) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary Public

My Commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_