



Developing Current and Future Leaders

Minnesota State Fire Chiefs Association (MSFCA)
6737 W Washington St, Ste 4210 • Milwaukee, WI 53214
www.msfca.org • 800-743-0911

Interactive Kitchen Education Simulator Application & Rental Agreement

Fire Department: _____
(Simulator must be reserved by a MSFCA member.)

Event Description: _____

Event Date: _____ **Pick-Up Date:** _____ **Drop-Off Date:** _____

Address: _____

Contact Name: _____ **Email:** _____

Phone: _____ **Cell:** _____ **Amount Paid:** _____

Pick-up, Return and Receiving: If you are receiving or returning the simulator to the host site, please coordinate a pick-up/drop-off schedule with the host department contact below. Please note: Some back-to-back reservations may occur during popular rental periods. If you are receiving or returning the simulator to another renting fire department, please contact that fire department to arrange a pick-up/drop-off schedule.

Host Department: Ramsey Fire Department
Contact: Carey Schiferli
763-427-4452 | cschiferli@ci.ramsey.mn.us
15050 Armstrong Blvd NW, Ramsey, MN 55303

Terms: Interactive Kitchen Education Simulator, hereafter referred to as the “simulator.”

Agreement: I agree to review the Interactive Kitchen Education Simulator manual prior to use and complete and submit the Post-Presentation Checklist after use. The manual is a set of directions and safety precautions that are to be adhered to at all times during operation and use of the simulator. I agree that only trained personnel will operate the simulator.

Undersigned agrees to secure and supervise both the simulator and its use at all times the equipment is in the possession of the undersigned. The undersigned shall be in sole charge of operation of the simulator during rental period. The undersigned shall be held responsible for vandalism, theft or damage to the rental equipment while in their possession.



I voluntarily release, indemnify, hold harmless and discharge Minnesota State Fire Chiefs Association (MSFCA) from any and all liability, claims, demands, actions or rights of actions, whether personal to me or to a third party which are related to, arise out of or are in any way connected with the rental of the simulator including those allegedly attributable to negligent acts or omissions. I agree to reimburse any attorney's fees and costs which may be incurred by MSFCA in the defense of any such liability claim, demand, action or right of action.

I acknowledge that I have adequate liability insurance to cover any bodily injury or property damage which might occur to me, the presenter, guests or staff from the use of the simulator I am renting or else I agree to bear the costs of such injury or damage myself.

The undersigned acknowledges responsibility for the return of the simulator and all the contents in a clean and organized condition. **The undersigned agrees to pay up to an additional \$400 clean up/restocking/repair fee if the simulator is returned with props missing, broken or dirty upon return.** The undersigned shall be liable for simulator and agrees that it will not be subjected to unnecessary rough or destructive use. If the simulator and supplies are returned in a damaged but repairable condition, the undersigned shall be liable for the cost of such repairs (other than normal wear and tear). If the simulator and contents are returned in a destroyed or non-repairable condition, the undersigned shall be liable for full monetary replacement value. To ensure that you are not held responsible for prior damage or lack of cleaning, complete the Post-Presentation Checklist prior to return. If the checklist and Activity Report are not complete, supplies are missing or the simulator is not cleaned, you will be held responsible.

Fees: \$250 for the first event day of use and \$50 for each additional event day. Refunds will not be issued if simulator is not used. Payment is required to reserve the simulator. Once payment is received, the rental will be reserved and place on the MSFCA calendar. Fire departments will be reimbursed for supplies with proof of purchase (itemized receipt).

Send and make checks payable to:

Minnesota State Fire Chiefs Association (MSFCA)
6737 W. Washington St., Ste 4210
Milwaukee, WI 53214

I acknowledge that I have had sufficient opportunity to read this entire document and that I understand its content and that I execute it freely, intelligently and agree to be bound by its terms.

Onsite Contact Name, Title: _____

Fire Department: _____

Signature: _____ **Date:** _____

Fire Chief Authorization Signature: _____

Revised: 07/27/2018

