

MEETING ROOM APPLICATION

Contact Person/Requestor: _____

Library Card Number: _____

Name of Organization: _____

Address: _____

Phone Number: _____ E-Mail Address _____

Program Title: _____

Brief Description of Program: _____

Anticipated Number of Attendees: _____

Date of Meeting: _____ Time: _____ am/pm To: _____ am/pm

All meetings must be open to the public and held during library hours. Commercial ventures are never permitted. Private social functions, fund raising activities, and the selling of goods or services are not allowed. Political campaigning and fundraising are not allowed. Failure to comply with these regulations will result in denial of future use of the meeting room.

Fees: A \$50.00 rental fee will be assessed for use of the meeting room. Use of the meeting room is limited to a maximum of four hours. The rental fee is due at the time of application. In the event that the application is denied, the fee will be returned to the Contact Person/Requestor. In the event of cancellation, the requester should promptly notify the Library Manager. Payment will not be returned unless a cancellation is made 24 hours in advance of the scheduled meeting.

The meeting room must be left in the same condition if was found upon entering. No smoking or alcoholic beverages. The library is not responsible for items left in the meeting room.

I have received, read, understand, and agree to comply with the Uncle Remus Regional Library System's Meeting Room Policy. I hereby fully release and discharge and agree to indemnify, hold harmless and defend the Uncle Remus Regional Library System, the library, its director, trustees, agents, and employees from any and all claims from injuries, including death, damages or loss, which may arise or which may be alleged to have arisen out of, or in connection with the above meeting(s) in the library.

Signature of Contact Person/Requestor Date

Approved by: _____
Library Manager Date