

DOLTON PUBLIC LIBRARY DISTRICT
APPLICATION FOR USE OF COMMUNITY ROOMS

Date of program: _____

Time: _____

Date of application: _____

Room to be used: _____

Organization or Group: _____

Nature & purpose of organization or group: _____

Purpose & content of meeting: _____

Expected attendance: _____ Kitchenette required? _____

Audio-Visual equipment required: _____

Furnishings (tables, chairs, etc.): _____

Audio-visual fee: _____ Refreshment fee: _____ Paid: _____ Refunded: _____

The Library is not responsible for losses due to cancellation of meeting. Notify the Library in writing of any cancellation as soon as possible.

RESPONSIBILITY: The person signing this application will be held responsible for any breakage occurring during the use of the room by the group.

INSURANCE: The public liability insurance coverage of the Library does not cover the negligence of the user(s) nor will it protect the user(s) if suit is brought against him/her.

HOLD HARMLESS AGREEMENT: Our group agrees to indemnify and hold harmless the trustees and staff of the Dolton Public Library for any and all accidents which may be sustained on the premises when we use a library meeting room.

Signature of responsible person: _____

Address: _____ Phone: (_____) _____ - _____

I HAVE READ THE RULES AND REGULATIONS AND AGREE TO COMPLY WITH THEM.

Name: _____ Dolton Library Card (Zebra #): _____

Signature: _____

Address: _____ Phone: (_____) _____ - _____

ADULT SPONSORSHIP CLAUSE:

If the meeting to be held is for persons under the age of 18, the signature of an adult sponsor is required:

Signature: _____