

River Forest Public Library

MEETING ROOM APPLICATION AND USE AGREEMENT

Name of Organization

Address and Telephone Number of Organization
and/or the Responsible Party

Responsible Party

Library Card Number

I/We respectfully request permission to use the meeting room of the River Forest Public Library on the following date, at the time indicated:

Date : (3 months out only) _____

Time _____

Fees

We are a for-profit organization and will pay the \$30.00 per hour (or fraction thereof) fee

We are a not-for-profit organization and will use the room free of charge

AV Equipment

We will be requiring use of the Library's equipment:

Projector None

DVD Player

Microphone

Laptop

We hereby acknowledge that prior to our use of the River Forest Public Library Meeting Room, we will have, or we already have, reviewed the MEETING ROOM POLICY and MEETING ROOM RULES AND REGULATIONS. We, individually and on behalf of our organization, agree to abide by all such policies, rules and regulations regarding our use of the room. Further, the Organization will undertake its best efforts to cause all others in the room during our use thereof to abide by the policies, rules and regulations.

We do hereby further agree to indemnify and hold harmless the River Forest Public Library and the Village of River Forest, as well as their respective officials, officers, trustees, employees, servants and agents, from any and all claims, demands, causes of action and any and all other expenses, including attorney's fees, should any be incurred arising from or during the course of our use of the room pursuant to this Application.

We shall also be responsible for any and all damage caused to the Library building, the premises, and the Library equipment and other personal property, whether said damage is negligently or willfully caused as a result of our use of the meeting room, and agree to leave the premises by closing time. We shall also set up the room to match the condition in which it was found.

Responsible Party Signature

Date

Approved

Not Approved

Amount Paid \$

Date Paid

Signature:

Day of Event

Is the Responsible Party present? Yes No

Upon After-Use Inspection

Signature

(Responsible Party)

(Staff Signature)

(Date)

This page to be filled out by Library Staff

Adopted and Revised 4/23/2015