

The Hurt/Battelle Memorial Library Meeting Room Agreement

Group Name/Event \_\_\_\_\_

Name \_\_\_\_\_  
(Must be 21 years or older)

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Email address \_\_\_\_\_

What time does your party start? (please include 2 hours for set up) \_\_\_\_\_

What time does your party end? (please include 1 hour for tear down) \_\_\_\_\_

To Be Filled Out By Library Staff Member

Form of Payment     Cash     Check # \_\_\_\_\_     N/C

Payment received by: \_\_\_\_\_ Date \_\_\_\_\_  
(Staff Member)

May pick up the key (date and time): \_\_\_\_\_

Alternate person to pick up the key: \_\_\_\_\_  
(Name - Must be 21 years or older)

Phone # of key alternate: \_\_\_\_\_

I, \_\_\_\_\_, picked up the key.  
(Print name here)

\_\_\_\_\_ Date \_\_\_\_\_  
(Signature)

(Revised 08/27/15)

Policy Highlights

- Groups that cancel with less than 24 hour notice will not be reimbursed
- Person using/booking the room must be 21 years or older
- Library reserves the right to change or cancel any meeting if circumstances so demand
- Access to the Meeting Room prior to 10:00 am may be arranged with the Librarian in Charge.
- Library prohibits open flame
- Library prohibits deep fat fryers
- Library prohibits the use of alcohol, drugs or smoking
- Library prohibits liquids, including ice cream, placed in the trash
- Library prohibits the use of tape on the walls
- Guide/Service dogs are the only animals allowed
- Meetings held in Meeting Room must not disturb normal Library operations
- Library will provide a limited number of tables and chairs
- No entity shall imply in their announcements or advertisements that the Library sponsors, promotes or endorses their product or services
- Please leave the room, including Restrooms, the way you found it
- The Board can and will assess a fee if the above conditions are not met

The person signing below agrees to hold harmless The Hurt/Battelle Memorial Library Board of Trustees and its members, employees and agents from any claim and liability arising out of or related to the use of the facilities and accepts full responsibility for any and all damages that occur. If requested, the signer must provide a Certificate of Liability Insurance on behalf of the group before the meeting date. A copy of the policy is available upon request.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Revised 08/27/15)