

Application and Agreement Form for Community Room Use

Organization Name: \_\_\_\_\_

President or representative: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: home \_\_\_\_\_ cell \_\_\_\_\_

Email (required): \_\_\_\_\_

Date requested: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM to \_\_\_\_\_ AM/PM

(if recurrent use is requested, rather than a single date, please indicate "2nd Thursday of each month," for example.)

Anticipated number attending meeting: \_\_\_\_\_

Type of event/purpose: \_\_\_\_\_

Equipment needs: \_\_\_\_\_ no equipment \_\_\_\_\_ internet access with library laptop  
\_\_\_\_\_ projector \_\_\_\_\_ additional tables/chairs

I have read the Kasson Public Library Community Room Policy and agree to comply with it.

Please initial each statement below:

\_\_\_\_\_ I agree to leave the room clean, and tables/chairs moved back to the original arrangement.

\_\_\_\_\_ I understand I will be held financially accountable for any stains or damage.

\_\_\_\_\_ I understand that no smoking or alcohol is allowed.

\_\_\_\_\_ I agree not to charge admission nor sell any products, and that I represent a not-for-profit organization.

\_\_\_\_\_ I agree to notify the library if our group needs to reschedule, cancel or postpone a meeting.

\_\_\_\_\_ I agree not to exceed the room's maximum capacity of 48 people.

\_\_\_\_\_ If picking up a key, I agree to return it to the book-drop immediately following the meeting.

\_\_\_\_\_ I agree that there will be at least 1 adult present per every 8 children attending.

\_\_\_\_\_ I agree to release, hold harmless and indemnify Kasson Public Library from and against all claims resulting from the use of the Meeting room.

Date \_\_\_\_\_ Signature of group representative: \_\_\_\_\_

Date \_\_\_\_\_ Signature of Library Staff: \_\_\_\_\_