

APPLICATION FOR COMMUNITY ROOM USE EXTERNAL RENTAL

Organization or age	ency:	
Name		
Address		
Telephone		
Contact person:		
Name		
Address		
Telephone		
E-mail		
Purpose of meeting		
Library hours	Monday-Thursday 10	:00 AM – 8:00 PM
	Friday-Saturday 10:00) AM – 5:00 PM
	Sunday 1:00 PM – 4:0	0 PM (September through May)
Date requested:		
Time requested:	Start of set up	
	End of Clean up	
Note: All rentals tha	t are scheduled toward	the end of library hours must agree to be cleaned up and exiting
the area 15 minutes	before closing time.	
□ Non-Profit rent□ Non-Profit rent□ For-profit rent□ For-profit rent	ng 1/2 the community ng the Full community	room, 0-64 people - no charge room, 65-150 people - \$75 charge room, 0-64 people - \$150 charge
☐ If you are servir	ng food & beverages th	ere is a \$25 charge. Please include it in the check amount.
Select the Proje Presenta Movie P *Presenter must su video, etc. Library possible after your test your presentat	ector you would like to ation Projector rojector with DVD play pply laptop computer, offers free Wi-Fi. We r date is approved. Con ion: it@wvpl.org or 21	er and surround sound tablet, smart phone, DVD, USB thumb drive, streaming ecommend that you test your presentation as soon as tact Adam Button or Susan Gustafson with questions or to 5-643-1320 x25.
If the equipment is		narged the full replacement cost.
IS THE OTHANIZATION	INSUIPOT YES!	INO

Limits of Use

- Per order of the Fire Marshall, attendance is limited to 150 people when renting the whole room. If you rent half the room attendance is limited to 64 people.
- Library programs take precedence over any and all rentals in the Community Room. Rentals will not be scheduled at the same time as a library program.
- Library staff will not be available to oversee the community room during the event.
- The organization will be required to set up the room for the desired use. Tables and chairs are available for use as needed.
- The organization agrees to clean the area immediately after use and put all trash in proper receptacles.
- WVPL is simply the location of your event. Publicity must clearly state that your organization is the SPONSOR and that the library is just the LOCATION.
- Do not include the library's telephone number on flyers or in news releases.
- The date cannot be confirmed until this form, payment, and certificate of insurance are received. Payment must be received a minimum of 14 days prior to the event. Make check payable to the Wissahickon Valley Public Library.

Insurance and Hold Harmless

A certificate of insurance is delivered with this application for community room use with limits of at least \$500,000 each occurrence, \$1,000,000 aggregate, which lists the Wissahickon Valley Public Library, its board, employees and volunteers as additional insured. The requesting organization hereby agrees to indemnify, defend and hold harmless the Wissahickon Valley Public Library, its board, employees and volunteers from any and all liability, claims and damages (including personal injury) as a result of use of the library.

	ment of Responsibility (please initia	"/			
		lley Public Library's Community Room Use Policy and agree t			
abide	by the library's rules. I understand	d that our group shall assume financial responsibility for any			
equip	ment, rental, clean up or damage f	ees. I understand that the community room may not be use	inderstand that the community room may not be used		
for sa	les or solicitation. I understand that	at we will be responsible for our group and its guests while			
using	the library facilities. I agree to rep	ort any injury or accident occurring on the premises. I agree	to		
abide	by these and all other terms and co	ondition as set forth in the Wissahickon Valley Public Library	's		
Comn		acknowledge receipt of a copy of the meeting room use policesponsible for set-up of tables and chairs for the event, and	cy.		
	•	nderstand that our group must clean up and exit the area 15 e staff will use gentle reminders to ensure proper closing			
proce	dures.				
	dures. Name	 Signature			
Print					
	Name	Signature			
Print	Name For staff use:				
Print	Name For staff use: Staff Initials		_		
Print	Name For staff use:		_		