

Contract must be returned at least 48 hours before meeting date. Form may be filled in electronically and emailed back, faxed to 419.529.3693, mailed or presented in person at the Ontario Branch Library.

Meeting Room Contract - Ontario Branch

Name of group or organization _____

The applicant agrees to protect, defagents, free and harmless from and or liabilities of every kind and charapplicant, negligent or otherwise, a The applicant agrees to pay all damarising out of the aforementioned a The applicant also agrees to abide the facility or misrepresentation of any Library meeting rooms. Library • Tutoring sessions • Clothing giveaways	against any and acter out of or in and its employed nages, costs and cts or omissions by the Meeting I the meeting's pu	I all losses, penant on combination wes, officers, agent expenses of the s. Room Policy, and prose may result	Ities, damages ith any acts o its, guests or in Library in defeat acknowledges in the loss of	s, settlements, costs r omission of the dependent contractors ending any action es that any misuse of
I have read the Meeting Roc	m Policy and a	ccept responsibil	ity for the req	uested area.
Type or print full name of person as	greeing to assun	ne responsibility	for facility and	d conduct of group:
/1 1	5 0	1 /	,	0 1
Signed		Date		
0.44				
Address				
City/State/Zip				
Phone #	Daytime	Evening	Cell	Fax
Alt. Phone #	Daytime	Evening	Cell	Fax
email				
Please notify the library in case of The library reserves the right to cancel				
Purpose of meeting				
Date(s) requested				
Times requested				
Size of group expected				