

Contract must be returned at least 48 hours before meeting date. Form may be filled in electronically and emailed back, faxed to 419.687.5655, mailed or presented in person at the Plymouth Branch Library.

Meeting Room Contract - Plymouth Branch

Name of group or organization					
The applicant agrees to protect, agents, free and harmless from a or liabilities of every kind and capplicant, negligent or otherwis. The applicant agrees to pay all carising out of the aforementione. The applicant also agrees to abit the facility or misrepresentation any Library meeting rooms. Library meeting rooms. Library meeting sessions	and against any and haracter out of or in e, and its employeed damages, costs and ed acts or omissions de by the Meeting I of the meeting's pu	I all losses, pena n combination was, officers, agen- expenses of the Room Policy, and prose may resul	Ities, damages vith any acts o ts, guests or in Library in def d acknowledg t in the loss of	s, settlements, cost r omission of the dependent contra ending any action es that any misuse	ts ctors
 Clothing giveaways 					
I have read the Meeting	Room Policy and ac	ccept responsibil	ity for the req	uested area.	
Type or print full name of perso	n agreeing to assum	ne responsibility	for facility and	d conduct of grou	p:
Signed		Date			
Address					
City/State/Zip					
Phone #	Daytime	Evening	Cell	Fax	
Alt. Phone #	_ Daytime	Evening	Cell	Fax	
email					
Please notify the library in case The library reserves the right to ca					√ities.
Purpose of meeting					
Date(s) requested					
Times requested	to				
Size of group expected					