

Name of group or organization _____

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

The applicant agrees to protect, defend, indemnify and hold the Library, its officers, employees and agents, free and harmless from and against any and all losses, penalties, damages, settlements, costs or liabilities of every kind and character out of or in combination with any acts or omission of the applicant, negligent or otherwise, and its employees, officers, agents, guests or independent contractors. The applicant agrees to pay all damages, costs and expenses of the Library in defending any action arising out of the aforementioned acts or omissions. The applicant also agrees to abide by the Meeting Room Policy, and acknowledges that any misuse of the facility or misrepresentation of the meeting's purpose may result in the loss of the privilege of using any Library meeting rooms. Library meeting rooms may not be used for: • Tutoring sessions • 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 person	on 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 c					vities
Purpose of meeting					
Date(s) requested					
Times requested					
Size of group expected					