

MATTAPOISETT FREE PUBLIC LIBRARY

Meeting Room Application

Name of organization _____

Address _____

Name of responsible party _____

Telephone number s day _____ evening _____

cell phone _____ email _____

Type of organization: Library related _____ Educational _____ Cultural _____ Civic _____

Local _____ Regional _____ State Agency _____ Other _____ (explain)

Anticipated attendance _____ Purpose _____

Day/Date requested _____ Time _____ Length of meeting _____

Meeting Room _____ (capacity 75) Marine Room (library use only) _____

Is this a one-time use? _____ yes _____ monthly _____ (up to 3 months in advance is possible)

Equipment requested, if any _____

I certify that I am authorized to reserve space for the above stated organization and that the above statements are true to the best of my knowledge.

I agree that I (the applicant) will be responsible for any damage to the premises, including equipment and furnishings, caused by the applicant or attendees and guests, and agree to pay for said damages as assessed by the Board of Trustees and the Library Director.

I have read and agree to abide by the rules and policies of the Mattapoissett Free Public Library governing the use of the premises, including rules prohibiting the charging of an entrance free or for profit activities.

I agree to hold the Town of Mattapoissett, the Library Board of Trustees, the Library Director, their agents and employees forever free and harmless and indemnified against any and all loss, cost, expense arising from any accident or other occurrence causing injury to any person or property as a result of the use of the library premises.

Signature of Responsible Party _____

Print Name of Responsible Party _____

Title _____ Date _____

STAFF USE: _____