Application for Use of the Community Room Please Print

PO Box 797 Name of Organization or Group_____ 207 N Walnut St Morgantown, PA 19543 Contact Name 610-286-1022 Fax 610-286-1024 Street Address_____ www.villagelibrary.org City______ State _____ Zip Code _____ Payment Log Phone Home Date Amount **Initials** Email _____ Date requested_____ Hours: From _____ To _____ Expected number of attendees (max. 100 people) State the specific purpose for using the room: Needs: We will be ____ using the Kitchen ____Setting up tables _____Setting up chairs _____ Other (please describe) (There is a nonrefundable \$50 deposit for use of the Community Room. Make checks payable to "The Village Library") By signing this application the person whose signature appears below signifies that he/she is: 1. Aware of the regulations for use of the Community Room, 2. Is responsible for the group, will see that the building, grounds, and equipment are used in conformity with the regulations of the Library Board of Trustees, and that there is proper adult supervision. 3. In the event of damage to the building, grounds, or equipment, the organization or individual shall pay for the correction of such damage. 4. It is hereby also understood that library activities have priority for the use of all facilities. This agreement will be revalidated on an annual basis. I have read and agree to the terms as outlined above. Please Sign Here Print Name _____ Office held / position / _____ Request Submitted on: _____ Approved_____ Denied _____ Initials _____

Director's Signature _____ Date _____T

Village Library

of Morgantown