



BANKS PUBLIC LIBRARY COMMUNITY ROOM USE APPLICATION

Organization (“Applicant”) _____

Activity/Event _____ Category _____

Date _____ Time _____ Number of People Expected _____

Applicant’s Representative (must be present at event and authorized to represent the Organization)

Name _____

Address _____

Cell Phone _____ Email _____

Facility Set-up (Please indicate what furniture and access you need)

Tables (10 available) _____ Chairs (30 available) _____ Kitchen access? Yes ____ No ____

Access to Technology? Yes ____ No ____ If yes, staff will contact you.

By signing this application, the Applicant agrees to and certifies the following:

- Applicant certifies that all information is true and correct and that the Representative signing this application has the authority to represent the Applicant, make this application, and bind the Applicant.
- Applicant certifies that it has read, understands and agrees to comply with and be bound by the Banks Public Library Community Room Use Policy and all of its requirements.
- Applicant assumes all responsibility and liability for damage to the facility and library equipment covered by this application regardless of cause.
- Applicant certifies that it will provide all necessary personnel, including the Representative, to supervise and monitor compliance with Banks Public Library Community Room Use Policy and maintain safety necessary to protect persons and property involved in activities associated with the permit issued.
- Applicant agrees to hold harmless and indemnify Banks Public Library, the Friends of the Banks Library, the City of Banks, and their respective employees, volunteers, and officials from all claims, demands, liabilities, and obligations, and associated costs, including attorney fees, that may be asserted due to use of the City’s facilities by the Applicant, its officers, employees, representatives, participants, attendees, and invitees.

- Applicant's officers, employees, representatives, participants, attendees, and invitees shall comply with all federal, state, and municipal equal opportunity laws and regulations prohibiting discrimination. Applicant agrees to not discriminate against a qualified individual with a disability. Applicant agrees to provide a qualified individual with a disability an opportunity to participate in or benefit from the aid, benefit, or service that is equal to that afforded others involved in the program or activity.

Signature _____ Date _____

For Office Use Only

Approved: ____ Denied: ____ Date Application received: _____ Received by: _____