

MENTOR PUBLIC LIBRARY
USE OF LIBRARY FACILITIES RENTAL AGREEMENT

Name of Person or Organization: _____

Describe the Organization: _____

Type of Organization:

_____ **Non-Profit 501(C)3** (charitable) _____ **Non-Profit 501(C)3** (non-charitable)

_____ **For Profit**

Address: _____ City: _____ Zip: _____

Phone: () _____ Email: _____

Representative reserving meeting room: _____

Contact Number: () _____ Mentor Public Library Card Number (only)*: _____

Description and type of meeting: _____

Room reserved/requested: _____

Time and Date reserved: _____

Room Rate: _____ Amount Paid: _____

Check ___ Cash ___ Credit Card ___ Damage Deposit (if any): _____

Received By: _____ Date: _____

I have read and understand the meeting room policy, its rules and procedures, as posted on the Library's website, and I agree to abide by them and to be responsible for damages to Library equipment or facilities during scheduled use of the meeting room. I agree to indemnify and hold harmless the Mentor Public Library and/or its Trustees and staff, from and against any and all claims, demands, or actions that may be made or instituted against any of them arising out of the occupancy or use of the premises.

Signature: _____

Print name: _____ Date: _____

*If you do not have a Mentor Public Library card, please stop at the Circulation Desk on the 1st floor to obtain one. A Mentor Public Library card in good standing is required by policy for room reservations.