W.J. Niederkorn Library - Community Room Application Form

Today's date:				
Meeting Information				
Title of meeting/event:				
Description:				
Preferred Date of Meeting:				
		Preferred Meeting End Time:		
Estimated Number of Attendees:		S		
Room Use Charge:				
Contact Information				
Name of individual, organization, group, or busing	ness:			
If your organization non-profit? Circle: YES	NO			
Organization address:				
(Street)	(City)	(State)	(Zip Code)	
Organization Contact:				
(First)	(Last)		(Title)	
Telephone:	Email:			
Agreement				
I, the undersigned applicant for myself or on behalf of the release the W.J. Niederkorn Library and the City of Port of any kind or nature whatsoever occurring while applicated that all property of any kind brought onto the premises Washington, and their employees and/or agents shall not on the premises.	Washington, its employees o ant is using the Community R shall be at the risk of the app	r agents from any liabilit coom and Library facility. licant. The W.J. Niederko	y for damages, claims or injur It is agreed and understood orn Library, the City of Port	
The undersigned applicant:				
 Has read and understands the rules and regular assuring said use complies with these rules. Agrees to be liable for any damage caused to the same and the community of the community of	he Library facility or equipme ity Room is not endorsement	ent by anyone attending of the group's policies, k	the applicant's event.	
Printed Name:				
Signature:	D	ate:		
STAFF USE				

Circle: APPROVED DENIED Staff name:_____ Date: _____ Payment received: _____