

Parsons Memorial Library Community Room Application

Date: _____ Name of Group: _____

Type of Function: _____

Event Date: _____ Event Time: _____

Dates event will meet if repeated: _____

Estimated Attendance: _____

Contact Person: _____ Phone: _____

Email: _____ Address: _____

Function Responsibilities:

- Events generally should take place during library hours. Arrangements can be made for the hour directly after close. (Mo 11-6, Tu 10-4, We 11-6, Sa 10-3)
- The group may be charged a \$25.00 function fee at the discretion of the Board of Trustees.
- The group accepts full responsibility for the conduct of all persons attending the function.
- The group accepts full liability for any loss or damage to library property by any person attending the function.
- The group agrees to confine the function to the Community Room.
- The group makes no charge for attendance at the function.
- The group sets up and completes all preparations for the function. The group leaves the Community Room in a clean and organized manner at the close of the function. If janitorial or other services are needed, the group agrees to pay the costs.
- The group obtains and operates any required equipment or materials, removing the same from the room at the close of the function.
- In some cases, the group will need to provide a Certificate of Insurance naming the town as an Additional Insured.

Signature of Representative: _____

Approved by: _____ Date Approved: _____

Function fee: Yes No