

Amagansett Free Library

215 Main St., PO Box 2550

Amagansett, NY 11930

631-267-3810

LIBRARY USE ONLY

Date Application Received _____

Organization or Group _____

Individual Staff Initials _____

Application & Agreement for Meeting Room Use

(Please print and fill out both sides)

√ Read the Meeting Room Use Policy to ensure your group is eligible to use the Library's Community Room.

√ Complete and sign the application. Application must be received at least two weeks prior to the requested date.

√ Return application and other required materials by fax, mail or in person to the Library.

First Time Application Renewal Date Application Submitted _____

Name of Applicant (Organization, Group, or Individual): _____

Organization or Group Representative's Name/Title: _____

Telephone Number(s) of Applicant/Representative: _____

Mailing Address: _____

Email: _____

Type of Event (select one): Meeting Lecture Workshop Other _____

Please describe the event's purpose and/or activities: _____

Library Hours: Monday, Tuesday, & Saturday 10:00 AM - 5:00 PM;

Wednesday, Thursday, & Friday 10:00 AM - 7:00 PM; Sunday 1:00 - 4:00 PM

Day(s) and date(s) of event(s): _____

Start time of event: _____ Time of arrival for set-up: _____

End time of event: _____ Time of departure after clean-up: _____

Number of people expected (maximum 40 for lectures, 20 with tables and chairs): _____

If you expect minors, please indicate their age range: _____ How many adult supervisors: _____

Applicants must have basic knowledge of equipment operation.

Library equipment requested:

Projector & Screen DVD Laptop w/ WiFi Lectern Tables # _____ Chairs # _____

Do you require an appointment with a staff member for training with our technology? Yes No

Please indicate on a separate piece of paper how you would like the room arranged.

All refreshments must be approved by the Library Director prior to the event.

Are you planning on serving refreshments? Yes No

If yes, please indicate what you have planned: _____

PLEASE READ THE FOLLOWING AND INITIAL

I understand my initials represent acceptance to each of the terms and conditions laid out below. _____

I have read the Amagansett Free Library Community Room Use Policy and agree to its terms. _____

I agree to release the Amagansett Free Library, its officers, directors, employees, trustees, and agents from any and all liability, claim, or loss arising from my use of the Library's facilities. This includes use by my guests, employees, agents, or invitees. I further understand that this release includes attorney's fees and other costs incurred by the Library in association with defending any claim arising from my use of the Library's facilities. _____

I understand I may be asked to sign a separate indemnification/hold-harmless agreement in favor of the Library notwithstanding the above. _____

I understand the Library's policy requires all applicants to submit a liability Certificate of Insurance naming the Amagansett Free library as additional insured (minimum of \$1,000,000). Any waiver of this requirement must be approved by the Library Director. _____

I understand I may be billed for any use of Library facilities beyond the agreed time. _____

I understand I may be billed for cleaning services if the Community Room is not left in a neat and orderly fashion. _____

If I am signing on behalf of a corporation, business, organization, or any other entity aside from myself in a personal capacity, I represent that I am authorized by said corporation, business, organization, or entity to do so, and to bind them to all the terms and conditions above. _____

As the applicant, are you fully authorized to agree to the faithful execution of the terms set forth in the Amagansett Free Library Meeting Room Use Policy and do you assume complete responsibility in connection therewith? Yes No

Signature: _____ Date: _____

Submit this completed application to:

Drop off In Person: Amagansett Free Library, 215 Main St., Amagansett, NY 11930

By Mail: Amagansett Free Library, PO Box 2550, Amagansett, NY 11930

By email to: info@amagansettlibrary.org