

Friends of Les Cheneaux Community Library Multi-Purpose Room Request Form

(Please complete both sides of this form)

NAME OF ORGANIZATION _____

ADDRESS _____

CONTACT PERSON _____

TELEPHONE _____

DATE(S) REQUESTED _____
(date/month/year)

TIME REQUESTED: from _____ AM/PM to _____ AM/PM

DESCRIBE HOW THE MULTI-PURPOSE ROOM WILL BE USED: _____

NUMBER OF PEOPLE USING THE ROOM _____

WILL A FEE BE CHARGED FOR THIS ACTIVITY? ____ YES ____ NO
*(see Multi-Purpose Room Usage Policy Sec. II, E.)

IF YES, there will be a charge of \$25 per session (Ref. Sec. II, E). There will not be a fee for room usage (during regular library hours) with presentation of organization's 501 (c) (3) documentation (attach copy to request form).

Amount owed: _____

COMMENTS/SPECIAL REQUESTS _____
(regarding use of equipment)

APPROVED _____ NOT APPROVED _____

SIGNED _____ DATE _____
(Group representative) (DATE/MONTH/YEAR)

SIGNED _____ DATE _____
(FLCCL designee) (DATE/MONTH/YEAR)

Friends of Les Cheneaux Community Library
Multi-Purpose Room Contract

I/We _____ agree to use the Multi-Purpose room of Les Cheneaux Community Library (LCCL), a branch of Bayliss Public Library, Sault Ste. Marie, MI on _____ for a period of time beginning _____ and ending _____.

I/We agree to honor the policies and procedures of the LCCL and will use the Multi-Purpose Room as described in this request form approved by the Friends of Les Cheneaux Library (FLCCL).

I/We understand that this contract may be terminated without notice if the policies and procedures of the LCCL or this contract are violated, with the approval of a majority of the library board members.

I/We agree to take full responsibility for the use of the Multi-Purpose Room, which will include setting up and cleaning when the room has been vacated.

I/We further agree that the use of the Multi-Purpose Room will be for FLCCL approved purposes only and used during regular library hours. I/We further understand that this is a Public Library and by using the Multi-Purpose Room I/We will not be interfering with the staff and patrons that will be using the library.

I/We acknowledge that we have read a copy of the Multi-Purpose Room Policy and agree to the conditions detailed in the policy _____.

I/We acknowledge that the FLCCL will authorize use of the Multi-Purpose Room to _____ for the date _____ and the times between _____ and _____.

Finally, I/We agree that either party can terminate this agreement without notice if _____ continued use of the Multi-Purpose Room creates a direct threat or violation of the policies and procedures of the LCCL.

If any provision of this contract, the attached library policies, rules and responsibilities are held invalid or unenforceable, it should be ineffective only to the extent of the invalidity, without affecting or impairing the validity or enforceability of the remainder of the provision or the remaining provisions and intent of this contract. This contract constitutes the entire agreement among the parties to it and supersedes any prior understandings or agreements. Each party acknowledges and states that no representation, inducement, or condition not set forth in this contract has been made or relied upon by either party. The laws of the State of Michigan shall govern this contract.

Name of Organization Date

Representative Phone Number

Representative of FLCCL Date