



Danville Public
LIBRARY

Meeting Room Reservation Form

Organization Name: _____ Today's Date: _____

Organization Status: Non-Profit: _____ No Fee
For-Profit: _____ \$50 per hour or part of hour

Purpose of Meeting: _____ Est. Attendance: _____

Name of Contact: _____ Contact Phone: _____

Email Address: _____
Preferred contact method? Phone: _____ Email: _____

Address: _____

Date(s) of Meetings: _____

Time of Meeting(s): Include set up and clean up (can be up to 30 min. before and 30 min. after)

Set up will begin: _____ Meeting will begin: _____
Meeting will end: _____ Clean up will end: _____

Will your group use the kitchen? Yes _____ No _____

Please indicate seating arrangement:
Regular Set-up (U-shaped tables, seats 40) _____
Theatre seating (no tables, seats 78) _____
Other: How many chairs? _____ How many tables? _____

NOTE: You must notify Youth Services Staff when your meeting is finished.

In order to reserve a room, the Liability Waiver/Indemnification Agreement on the reverse side of this form MUST be signed.

Liability Waiver/Indemnification Agreement

I have received, read, understood, and agree to comply with Danville Public Library's Meeting Room Policy.

I hereby release and discharge the Danville Public Library Board of Trustees, the City of Danville, its officers, agents, and employees from any and all claims from injuries, including death, damages or loss, which may arise or which may be alleged to have arisen out of, or in connection with the above meeting(s) in Danville Public Library.

I further agree to indemnify and hold harmless and defend the Danville Public Library Board of Trustees, the City of Danville, its officers, agents, and employees from any and all claims resulting from injuries, including death, damages and losses, including, but not limited to the general public, which may arise or may be alleged to have arisen out of, or in connection with the above meeting(s) in Danville Public Library.

Signature

Persons reserving the meeting room must be at least eighteen years of age.

Return this form to :

Kathy Hoaks
Danville Public Library
319 N. Vermilion St.
Danville, IL 61832

or

khoaks@danvillepubliclibrary.org