

**Hustisford Community Library
609 W. Juneau Street
Hustisford, WI**

Application for Use of the Community Room

(Please Print Clearly)

Date of meeting: _____ Reservation Start Time: _____ End time: _____

Actual time of meeting: _____ Will program continue after hours? ____yes ____no

Full name of organization: _____

Type of group (check one) ____Civic ____Social/Club____ Educational

____Community/Association ____Incorporated ____Non-Profit ____Other

Estimated attendance of program _____

Chairs Needed: _____ Tables Needed: _____

Equipment Requested:

_____Screen & Projector (DVD/HDMI) _____Kitchenette _____Sound bar
_____White Board (markers provided) _____podium

Will refreshments be served? ____yes ____no

Contact Person(s): _____ Phone (Home) _____

Phone (Work): _____ Address: _____

City/State/Zip: _____

The undersigned, on behalf of the above organization, has read and agrees to comply with the policies and procedures governing the use of the Library Community Room. The applicant shall indemnify and hold harmless the Village of Hustisford, the Town of Hustisford, its officers and employees, and the Hustisford Community Library Board of Trustees from any damages for personal injury or property damage and for the costs of defending claims for the same, including attorneys' fees, arising out of the acts or omissions of the applicant in its activities' at the meeting room in the Hustisford Community Library.

Applicant

Signature: _____ Date: _____

All applications will be reviewed before final approval.

Please do not advertise your meeting until approved.

All announcements must clearly state that your program is NOT sponsored by the Hustisford Community Library.

Young children should not be left unattended in the Library while their caregivers are attending meetings.

Please refer to the Community Room Policy for all rules and regulations.

This Side Library Use Only

Approved: _____ Initials: _____

(If Applicable) Paid Amount: _____ Cash/Check: _____

Date: _____

After Hours Key needed: _____ yes _____ no

List equipment, table & chairs needed:

Staff members scheduled to be at the library during start time:

After Event:

Comments/Concerns