



LIBRARY MEETING ROOM RENTAL AGREEMENT FORM

Organization: _____

Billing Address: _____

City/Town: _____ Postal Code: _____

Contact name: _____

Phone Number: _____ Fax Number: _____

E-Mail: _____

Date(s) Required: _____

(Time to / from): _____

Estimated Attendance: _____ Room Requested: _____

Set-up Style Requested: Theatre Banquet Classroom Conference U-Shape

Additional Notes Regarding Room Setup:

RENTAL EQUIPMENT	FEE(S)
<input type="checkbox"/> Laptop Projector	\$15.00
<input type="checkbox"/> Overhead Projector	\$10.00
<input type="checkbox"/> Microphone	\$10.00
<input type="checkbox"/> TV / VCR / DVD Player	\$10.00
<input type="checkbox"/> Internet Usage	\$10.00
<input type="checkbox"/> Teleconference Phone Line (plus any long distance charges incurred)	\$10.00
<input type="checkbox"/> Conference Phone	\$10.00
<input type="checkbox"/> Lectern	No Charge
<input type="checkbox"/> Assistive Listening Device	No Charge
<input type="checkbox"/> Flipchart (includes 1 black marker)	No Charge

<u>Complimentary Amenities In Each Room</u>
Sink with countertop
Whiteboard (includes 1 black dry marker)
Screen

RENTAL FEES	
ROOM FEE(S)	\$.
	\$.
EQUIPMENT FEE(S)	\$.
	\$.
OTHER FEE(S)	\$.
SUB TOTAL:	\$.
HST	\$.
TOTAL:	\$.

DO YOU REQUIRE AN INVOICE?

PLEASE ADVISE ALL PARTICIPANTS THAT A PUBLIC PARKING LOT, LOCATED ON COLBORNE STREET DIRECTLY EAST OF THE LIBRARY, IS AVAILABLE FOR A NOMINAL FEE AND FREE AFTER 6:00 PM AND WEEKENDS. PARKING SPACES DIRECTLY BEHIND THE LIBRARY ARE AVAILABLE ONLY TO LIBRARY PATRONS FOR SHORT-TERM USE.

In consideration of the issuance of the Permit which is the subject matter of this Permit, the undersigned (jointly and severally if more than one) covenants and agrees to indemnify and save harmless of the Whitby Public Library, the Town of Whitby, its Officers, Employees, Servants, Agents and Contractors and their respective Heirs, Executors, Administrators, Successors, and assigns, with respect to any and all actions, cause of actions, claims, demands, proceedings, costs, damages and expenses howsoever arising either directly or indirectly from the issuance of such Permit and the carrying on of the business, project or other activity for which this Permit is issued. Failure to comply with the Rules and Regulations of the Permit could result in the cancellation of this Permit.

It is understood and agreed between the applicant and the Whitby Public Library that the applicant has read the regulations governing the rental of the room(s) and that the conditions contained therein will be observed.

DATE

SIGNATURE OF CLIENT

Completed form can be faxed to 905-668-7445

OFFICE USE ONLY			
C O N F I R M A T I O N O F R E S E R V A T I O N			
Reservation is hereby confirmed of the space required as indicated above. Payment of \$ _____ has been received.			
<input type="checkbox"/> CASH	<input type="checkbox"/> DEBIT	<input type="checkbox"/> CHEQUE # _____	<input type="checkbox"/> CREDIT CARD [VISA / MasterCard]
INVOICE # :	<input style="width: 150px; height: 25px;" type="text"/>		
_____ DATE	_____ AUTHORIZED STAFF SIGNATURE		