

RACINE PUBLIC LIBRARY
75 Seventh Street Racine, WI 53403
Application to Use the Library Meeting Room

Organization _____

Address _____ Zip _____ Telephone _____

Day/Date of Meeting _____ Time _____ Number of Persons _____

If other than normal business meeting, please state type of activity to be held: _____

Special Arrangements (Circle yes or no)

Refreshments to be served? yes no

Room/area reserved: _____

AGREEMENT

This signed agreement certifies that the applicant has received a copy of, is familiar with, and agrees to abide by the regulations stipulated in the Racine Public Library Meeting Room Policy.

By signing this agreement, the applicant hereby agrees to **release from liability** the City of Racine, Wisconsin, the Racine Public Library Board of Trustees, their agents, officers, employees, and volunteers from any and all costs, damages, or injuries sustained as a result of using the Racine Public Library meeting room.

Further, the applicant agrees to **indemnify and hold harmless** the City of Racine, Wisconsin, the Racine Public Library Board of Trustees, their agents, officers, employees, and volunteers from any and all damage, loss, or liability of any kind whatsoever occasioned upon and/or within the library premises, or ways or walks or concourse adjacent thereto, by reason of any bodily injury to, or death of, any person, or by reason of any injury to property of third persons occasioned by any act or omission, neglect or wrongdoing of the applicant or any of his/her, and/or its officers, agents, representatives, assigns, guests, employees, invitees, or other persons admitted by the applicant to the premises, and the applicant will, at his/her, and/or its own cost and expense, defend and protect the Library Board, the City of Racine, Wisconsin, their agents, officers, employees and volunteers against any and all such claims or demands.

The Racine Public Library Board, the City of Racine, Wisconsin, their agents, officers, employees and volunteers are not responsible for the loss of individual property whether attended or unattended, before, during, or after using the library meeting room.

Applicant Signature _____ Date _____

Applicant Name _____
(please print or type)

Position or Title _____

Address _____ Zip _____ Telephone (H) _____

(W) _____

OFFICE USE ONLY

Approved by _____ Date _____ User Fee _____

Copy of Announcement _____ Received _____ Not Received