

Meeting Room 2018 Agreement

Rental charges -Per 4 hour period or less

- 1) Local Not-For-Profit organization \$0.00
(To be "local" you must primarily serve the residents of Morristown and/or Morris Township)
- 2) For-Profit organization or business \$500.00 per meeting date, not including any applicable taxes

Deposit against damages

\$50.00 payable by check only, no credit cards, at time of reservation. Refundable after the meeting if no damage is found.

Regular Library Hours (excluding holidays and holiday weekends)

Monday - Thursday 9:00 AM - 9:00 PM
Friday 9:00 AM - 6:00 PM
Saturday 9:30 AM - 5:00 PM - (September through June)
10:00 AM - 2:00 PM - (July and August)
Sunday 1:00 PM - 5:00 PM

All members and participants in the organization must completely vacate the meeting room 15 minutes before the Library closes, unless special permission is given.

Name of Organization _____

Check one: Local Not-For-Profit _____ For-Profit _____
(To be "local" you must primarily serve the residents of Morristown and Morris Township)

Purpose or Mission of Organization _____

Brief description of type and purpose of program to be scheduled _____

Individual signing for the Organization _____
(The person/organization listed above will be held financially responsible for any and all damages to the room, furnishings and/or equipment.)

Morristown & Morris Twp or MAIN Library Card # if avail. _____

Address _____

Phone (Home) _____ (Work) _____ (Cell) _____

E-Mail Address _____

Date(s) Requested _____ Expected Attendance _____
(Limit 10 per calendar year and only reserved 2 at a time)

Hours Scheduled _____ Hour Program will begin _____
(Include set up, break down & clean-up of meeting room)

Room Set-up? Audience style _____ Board Style _____ *(continues on back)*

Do you plan to serve Refreshments? Yes _____ No _____

If so, please describe: _____
(Refreshments must be approved by the Library Director prior to meeting date. Consumption of alcoholic beverages are prohibited)

Do you plan to distribute literature? Yes _____ No _____

If so, please describe or enclose sample _____

In the event of a cancellation, please notify the Library's Assistant Director ASAP at 973-538-6161, ext. 601 and/or email marylynn.becza@mainlib.org

NOTES:

No advertisements of the event may be posted in the Library without prior approval of the Library Director.

No admission fee may be charged except for those Conferences, Institutes, Not-for Profit Organizations, and regularly scheduled Adult Educational courses whose activities contribute to the cultural and educational welfare of the community. Such exceptions can only be allowed at the discretion of the Library Director acting for the Library Board of Trustees before scheduling said event.

The Joint Free Public Library of Morristown & Morris Township reserves the right to cancel or amend any reservation or length of reservation according to its discretion for reasons including but not limited to, unsafe weather or building conditions or failure of necessary equipment, substitution of a revenue producing reservation for one which was not, substitution of a Library or Municipal activity for another, improper use of the facilities on a prior occasion.

I have read and agree to abide by the provisions and regulations of the Joint Free Public Library of Morristown & Morris Township in governing the use of the meeting room. We further agree to indemnify and hold harmless the Joint Free Public Library of Morristown & Morris Township, its trustees, officers, employees and agents from any and all losses and expenses resulting from the use of the Library meeting room.

Individual signing for Organization _____ Date _____
(This person/Organization will be held financially responsible for any and all damages to the room, furnishings or equipment.)

Joint Free Public Library of Morristown & Morris Township

Approved _____ Date _____

Chad Leinaweaver, Director

For Library Use Only:	Received Rental Charges (if applicable) _____	Check # _____
	Received "Deposit against Damages" _____	Check # _____
	Received insurance certificate (if applicable) _____	
	Returned deposit _____	