

CUDAHY FAMILY LIBRARY: Application for Meeting Room Use

Please fill application out completely to be approved:

City/Government Agency
 Non-Profit Group
 For-Profit Group
 Social Function

Name of Organization/Group: _____

Represented by: Name _____ Title _____

Address _____

Telephone: _____ Fax _____ E-mail _____

Dates Requested: _____ Time Requested: _____ Estimated Attendance _____

Dates Requested: _____ Time Requested: _____ Estimated Attendance _____

Purpose of Use: _____

Indicate Room requested and the equipment needed:

_____ Ladish Co. Foundation Meeting Room / Geiger Kitchen

- Entire Room (45 occupants)
- Half Room – no preference (15 occupants)
- Half Room with screen (15 occupants)
- Half Room with Geiger Kitchen Access

- Chairs only
- Tables and Chairs
- Number of Tables _____
- Number of Chairs _____
- Geiger Kitchen

Equipment Needed, no fee:

- Microphone
- Podium
- Erase Board

Equipment Needed, \$2.00 fee:

- 30-cup Coffee Pot

Equipment needed, \$3.00 fee:

- Easel with Paper Pad

Equipment needed, \$5.00 fee for each:

- Laptop (wireless ready)
- LCD Projector
- Opaque Projector
- Overhead Projector
- Slide Projector
- TV with DVD and VCR
- Punch Bowl Set

_____ Winter Garden (100/150 occupants)

- Lounge Setting
- Chairs Only
- Tables and Chairs
- Number of Tables _____
- Number of Chairs _____

PLEASE DRAW A SKETCH OF HOW YOU WOULD LIKE THE ROOM SET UP ON THE BACK OF THIS APPLICATION

Food Served **Table Preference in Setup** **Round** **Rectangular**

As an authorized representative of the above organization, I hereby apply for the use of the facilities as indicated above. I have read the rules governing the use of the facilities included with this application and agree that they will be strictly observed. I accept responsibility on behalf of the above organization for any damages that might occur to Library or city property during our use of the facility. In case a meeting is canceled, I agree to notify the Library as far as in advance as possible. I shall indemnify and hold harmless the Cudahy Family Library, the City of Cudahy, its officers and employees, and the Cudahy Family Library Board of Trustees from any damages for personal injury or property damage and for the costs of defending claims for the same, including attorney fees, arising out of the acts or omissions of use of the meeting rooms in the Cudahy Family Library.

Signed: _____ Date: _____

Application Approved Not Approved because: _____

<input type="checkbox"/> Fee Collected	<input type="checkbox"/> Fee Returned	<input type="checkbox"/> \$2.00, \$3.00 or \$5.00 Fee for Equipment
Winter Garden \$50.00	<input type="checkbox"/> (1 – 4 hours use)	Before/After Hours Use: _____ Hours x \$25.00 per hour
\$75.00	<input type="checkbox"/> (4 – 8 hours use)	_____ Total for Use before/after hours
\$100.00	<input type="checkbox"/> (8 10 hours use)	
Ladish Room \$25.00	<input type="checkbox"/> (1 – 4 hours use)	
Geiger Kitchen \$10.00	_____	Total fee _____ paid on _____
Food Served \$10.00	_____	

Notes from Director: _____

Director's Signature _____ Date: _____