



Date Request Made _____

CONTRACT

APPLICATION FOR USE OF FAIRHOPE PUBLIC LIBRARY MEETING ROOMS

I, the undersigned, hereby apply for the use of the Giddens Conference Center and/or Board Room at the Fairhope Public Library and, in connection with said application, furnish the following:

1. I wish to use the: ___ Giddens Conference Center ___ Board Room

2. Date/Day of week Requested: _____
Hours: From _____ to _____ (including room set up and break down time).
** All meetings may be booked **NO EARLIER** than **15 MINUTES** after the library opens. **
** All meetings **MUST** adjourn **15 MINUTES** before library closes. **

3. Name of Organization: _____
Phone: _____ Phone: _____
Billing address: _____
City _____ State _____ Zip Code _____
Contact person and capacity/title: _____
Email Address: _____

4. Approximate number of persons expected: _____ Adults _____ Minors
If a youth group, how many adult sponsors will be in attendance? _____
(One adult per eight children is required)

5. Type of activity: _____

6. Equipment needed: ___ # of Tables ___ # of Chairs ___ Podium ___ DVD/VCR
___ Laptop ___ Projector Screen
___ Additional technical assistance required (Fees apply: see Fee Schedule)
Please list additional technical assistance if needed: _____

All presentations and computer files relevant to the event must be brought on a flash drive (often called thumb drive or USB). The drive must be compatible with a Windows 10/11 PC. Personal devices will not be permitted to connect to the library's A/V equipment.

7. An appointment with staff is required and must be arranged at least 24 hours prior to the event to review any A/V requirements.

8. I will be serving food and/or beverages: ___ Yes ___ No (Fees apply: see Fee Schedule)

9. Reservation will not be made until contract is signed and the Library has received payment for all fees.

I stipulate that I have read and understand all the rules and regulations for the use of the Giddens Conference Center, and/or the Board Room at the Fairhope Public Library. By signing this application, I agree that the facility will be used in conformity with these rules and regulations. I agree to accept total responsibility for any property damage to the meeting room and its contents and to see that groups have proper adult supervision. The signee of this contract must be present at the event listed above. It is hereby also understood that Library activities have priority for the use of the stated meeting rooms.

Initial: _____ Date: _____

MEETING ROOM USAGE CANCELLATION POLICY

Fee must accompany the contract. The Library will provide confirmation of reservation if possible within three (3) business days. The library reserves the right to cancel the reservation. All cancellations and/or date changes must be in writing and signed by the same person who signed the application and must be submitted no less than seven days prior to the event. Cancellation fee refunds will be made by check and delivered by mail. Seven day notice of cancellation is required for refund of fees.

No modifications to the contract are allowed 7 days or less prior to the event. This includes additional requests for A/V equipment use.

Initial: _____ Date: _____

INDEMNITY AND HOLD HARMLESS AGREEMENT

In consideration of the permission granted to me by the Fairhope Public Library to use the Giddens Conference Center and/or the Board Room of the Fairhope Public Library, I hereby indemnify and hold harmless the City of Fairhope, the Fairhope Public Library, the Library Board of Trustees, the Library Director and their agents, and staff from any and all claims and causes of action that may arise from injury to me or third parties using the facilities at Fairhope Public Library who are injured and suffer property damage that is in any way caused by my use of the Giddens Conference Center and/or Board Room of the Fairhope Public Library. This indemnity and hold harmless agreement is given to the Fairhope Public Library to protect the City of Fairhope, the Fairhope Public Library, the Library Board of Trustees, the Library Director and their agents, and staff from the cost of defense and claims for injuries and damages that may be caused either directly or indirectly by my use of the Giddens Conference Center and/or the Board Room.

I affirm that I am authorized to bind this organization to this contract and hold harmless agreement.

Signature: _____ Date: _____

***Please note that submitting an application does not guarantee approval of use of the room.**

Library Use Only Fees Paid\$ _____ Check No. _____ Date: _____ Initials _____

Approved: _____ Date: _____