

Colville Public Library Meeting Room
USAGE AGREEMENT

CONTACT INFORMATION

NAME OF INDIVIDUAL RENTING ROOM _____

NAME OF ORGANIZATION (IF APPLICABLE) _____

NAME OF EVENT _____

ADDRESS, CITY, STATE, ZIP _____

CELL PHONE _____

ALTERNATE PHONE _____

DRIVER'S LICENSE _____

NAME OF PERSON PICKING UP KEY (THEY MUST PRESENT ID) _____

TODAY'S DATE _____

Rental Room Policy

The Library Meeting Room and Kitchen are available for rent when not being utilized by the Library, the Colville Public Library Improvement Club, City of Colville or other library affiliated groups.

Permission to use the room will not be denied to any group of individuals because of race, color, national origin, religion, sex, marital status, age, sexual orientation, or disability.

Renters may make advance reservations no more than two months in advance. Reservations are tentative until the rental fee is paid in full. The Library and its affiliates reserve the right to cancel tentative reservations when the need arises.

Rental fees must be collected prior to room use. Reservations are not confirmed until rental fees are paid in full. There are no refunds.

Verification of identity and address will be required of all persons requesting to rent the meeting room. A government issued ID (such as a driver's license) will suffice for this purpose.

Renters under the age of 18 need to have this agreement co-signed by a parent/guardian who is 21 years of age or older and who will chaperone the meeting at all times.

I will follow the Rental Room Policy X _____

Clean-Up Responsibilities

Janitorial service, facility supplies, and inspection of the meeting room will be the responsibility of the library custodian during the work week. Basic cleaning, including vacuuming the meeting room floor, dishes, and other basic kitchen clean-up is the responsibility of the renter.

I will complete my Clean-Up Responsibilities X _____

TURN OVER TO COMPLETE THIS AGREEMENT

TV

Standard in-House Flat Screen SmartTV: Flat Screen SmartTV is available at no additional cost with the room rental. Renter is responsible for the repair of any damage incurred to the Vizio SmartTV AV equipment while in the renter’s use.

Usage of the TV is free with the rental fee. The remote is connected to the back of the TV

I understand the usage agreement of the SmartTV and understand that I am responsible for any damage to the TV or removal of the remote. X _____

Fees

\$30 – For up to four (4) hours

\$40 – 4-8 hours

\$25 – Kitchen use - in addition to room rental (not independently available)

\$50 – TV remote replacement fee (only charged if the remote is damaged or missing)

I agree to pay the room rental fee as indicated X _____

Rules for Meeting Room Usage

No alcoholic beverages of any kind are allowed on the premises.

Smoking is prohibited at all times.

Return the meeting room to ready condition-tables/chairs put away, garbage picked up, floors vacuumed, etc.

Service animals are permitted, pets are not.

The Library assumes no responsibility for items belonging to renters or participants that are lost, stolen, or damaged during the rental period.

No storage space will be provided unless prior arrangements are made.

The renter accepts financial responsibility for any and all damage caused to the building or equipment beyond normal wear. The renter will be responsible for any charges incurred by any/all participants.

Groups composed of minors (under 18 years of age) must have a parent/guardian over the age of 21 chaperone the meeting at all times. This chaperone must also sign the room rental application form.

Noise levels must be kept at appropriate levels. Renters who conduct activities that are unusually noisy or disruptive to regular library use will be asked to find another location.

Failure to adhere to any of the above policies is grounds for refusing further rental to any person or group.

The Colville Library Board reserves the right to deny rental of any library facility or part thereof to any individual and/or group by majority vote of the Board.

I agree that my guests and I will follow current health mandates X _____

I agree that my guests and I will follow the meeting room rules X _____

Print Name

Signature