

Troy-Miami County Public Library
Application for Meeting Room Use

*Organization: _____

*Organization Leader: _____

*Address: _____ *City: _____ *Zip: _____

*Phone: _____ Website: _____

*Description of Organization: _____

*Person Reserving Room: _____

*Address: _____ *City: _____ *Zip: _____

*Phone: _____ Email: _____

*Purpose of Meeting: _____

*Number Attending _____

*Day(s) & Date(s) & Times requested: _____

*"To the fullest extent permitted by law, the _____ agrees to defend, pay in behalf of, hold harmless and indemnify the Troy-Miami County Public Library against any and all claims, demands, suits, losses, including all costs connected therewith, for any damage which may be asserted, claimed or recovered against or from the Troy-Miami County Public Library, its elected and appointed officials, employees, volunteers or all others working in behalf of the Troy-Miami County Public Library, by reason of personal injury, including bodily injury and death; and/or property damage, including loss of use thereof, which arises out of the alleged negligence of Troy-Miami County Public Library and/or in any way connected or associated with this contract."

I have read the meeting room policy and agree to the terms of meeting room use.

I assume responsibility for use of the meeting room by the above organization.

*Signature: _____ *Date: _____

Approved by: _____ Date: _____

Completion of this application does not guarantee meeting room space will be available.

**REQUIRED INFORMATION*