**Meeting Room Reservation Form** Subject Adopted Nov. 21, 2002; Revised Apr. 13, 2004; Dec. 20, 2007; May 2009; Date June 20, 2018, Dec. 19, 2018 **Board of Library Trustees** Authority x Rules, Regulations, and Forms \_\_\_Policy \_\_\_Procedure

## **Meeting Room Reservation Form and Agreement Lucius Beebe Memorial Library** Wakefield, Massachusetts

| actually received by library staff. Pleas                    | <b>OTE:</b> No room reservation is complete until a completed, signed ORIGINAL of this form is ually received by library staff. Please make a copy of this form for your files before mitting it, and confirm with the staff that your reservation has been booked. |  |  |  |
|--|---|--|--|--|
| <b>1. Name of Organization.</b> The full naris:              | . Name of Organization. The full name of the organization which seeks to use a meeting room:  |  |  |  |
| <b>2. Address of Organization.</b> The organization address: | nization has a principal place of business at the following   |  |  |  |
| Telephone No.:   | Email   |  |  |  |
|  | ent of Wakefield, Massachusetts, who has signed below<br>e meeting room has a civic, educational, philanthropic, or<br>value to the community:  |  |  |  |
| By:  | Name:   |  |  |  |
| (Sponsor's Signature)  | (Print Name)  |  |  |  |
| Address:Wakefield, MA 01880                                  | Telephone No.:  |  |  |  |
| cancel the meeting because of snow or f                      | staff need to contact the organization (for example, to flood), the following person should be called, and it will group members of any cancellation or other change  |  |  |  |
| Name:(Print Name)  | Telephone No.:  |  |  |  |
| Address:   | Email:  |  |  |  |
| Note: the contact person need not be the                     | e same person identified in ¶ 3, above, as the Sponsor.   |  |  |  |

| Name:  |   |                        | Telephone No.  | ·   |
|--|---|------------------------|--|---|
| (Print Nan   | ne)   |                        | -  |   |
| Address:   |   |                        | Email:   |   |
| Note: neither cont   | act persons ne                                | ed be the              | same person identified in                              | ¶ 3, above, as the Sponsor                                      |
| <b>6. Type of Organ</b> applicable blanks)                                 |   | organizati             | on is the following (check                             | cone and fill in any  |
| an unincor   | porated associ                                | iation                 | ted in the state of                                    |   |
| 7. Past Meetings.<br>held meetings dur                                     |   | -                      | -  | where the organization ha                                       |
|  |   |                        |  |   |
| Name of Facility   | Da  | ate                    | Address  | Telephone No.   |
| Name of Facility   | Da  | ate                    | ,  |   |
| Name of Facility   | Da  | ate                    | Address  |   |
| Name of Facility   | Da  | ate                    | ,  | ·<br>   |
|  |   |                        |  |   |
| Name of Facility   |   |                        |  |   |
|  |   |                        |  |   |
| Attach additional  8. Date and Time following time and                     | sheets if necese of Booking.                  | ssary. The organ       |  | a meeting room for the ill attend the meeting as                |
| Attach additional  8. Date and Time following time and follows. Subsequent | sheets if neces e of Booking. d date and esti | The organ<br>mates the | nization desires to reserve<br>number of people who wi | a meeting room for the ill attend the meeting as lministration. |

- **8. Indemnification**. The undersigned organization hereby agrees to hold the Board of Library Trustees, and the Town of Wakefield, and all library staff, harmless from and to indemnify them against all costs, damages, losses, claims, and expenses incurred, directly or indirectly, as a result of such organization's use of a meeting room. Such costs, damages, losses, claims, and expenses shall include, without limitation, any damage to the meeting room or any other part of the library building, grounds or collection; the cost of employee overtime, if occasioned by the use of the meeting room; the cost of police protection, if deemed necessary by the Board of Library Trustees; and any claim asserted by any third person against the Board of Library Trustees, the Town of Wakefield, and/or any library staff on account of any alleged injury causally related to the meeting, together with defense costs including reasonable attorneys' fees.
- **9. Release.** In consideration of the use of the meeting room, the undersigned organization, for itself and each and all of its members, hereby releases, remises and waives any and all claims which they, or any of them, ever will or may have against the Board of Library Trustees, the Town of Wakefield and/or the library staff for any injury to persons or damage to property suffered by such group or any of its members during or as a result of the use of the meeting room, except insofar as such injury or damage is directly and solely caused by the negligence or intentional misconduct of any person belonging to or acting on behalf of the Board of Library Trustees, the town government of the Town of Wakefield or the library staff.
- **10. Meeting Room Policy.** The undersigned, on behalf of the organization, acknowledge(s) receipt of a copy of the Meeting Room Policy of the Board of Library Trustees of the Lucius Beebe Memorial Library and agree(s) to abide thereby.

|            | (Name of organization) |
|------------|------------------------|
|            |                        |
| <i>D</i> y | (Signature)            |
| Name:      |                        |
|            | (Print Name)           |
| Title:     |                        |
| Address:   |                        |