

## **APPLICATION FOR USE OF THE COMMUNITY ROOM**

Name of organization:		
Purpose of Meeting:		
		_
Date(s) of meeting(s):		
Starting Time:	Ending Time:	
Approximate number attending: Adults:	Children:	

I have read the Lansing Library Meeting Room Policy and agree to comply with it and to assume full legal responsibility as provided by it.

**INDEMNIFICATION:** For and in consideration of the use of the community room and library facilities any person or group using same hereby agrees to indemnify and hold the Lansing Public Library and the Village of Lansing harmless from any and all causes of action, suits, judgments, or settlement relating to its use of such room and facilities. Further, such person or group agrees to indemnify the Library and the Village for any and all costs for repair of any and all damages as may be caused directly or indirectly to the room and/or facilities by such use thereof.

**COMPLIANCE WITH THE ADA** (Americans With Disabilities Act): The person signing this application will be held responsible for insuring that any oral or written promotions of the above meeting will include a special "accommodations for the disabled" phrase such as, "individuals with disabilities who plan to attend this program and who require special accommodations in order to observe and/or participate in the program are requested to contact (name and telephone number) at least 10 (ten) days prior to the program so that reasonable accommodation can be made for them."

Technology Needs		_
Do you plan to bring food/drinks?	YES NO	
Name:	Lansing Library Card #	
Please print		
Address:		
Telephone: (Day)	(Evening)	-
Email:		
Signature:		
Approved:	Date:	