

**Form – Public Use Meeting Room Agreement**

Group \_\_\_\_\_

Representative Completing Form \_\_\_\_\_

Address \_\_\_\_\_  
(Street, City, State, ZIP Code)

Phone Number \_\_\_\_\_

Day & Date of Reservation \_\_\_\_\_

Beginning & Ending Times \_\_\_\_\_

Standing Reservation (12 Months Max.): \_\_\_\_\_ One-Time Use: \_\_\_\_\_  
Other (Please describe): \_\_\_\_\_

Proposed Activity \_\_\_\_\_

Expected Attendance \_\_\_\_\_

Materials to Be Distributed \_\_\_\_\_

Will refreshments be served? \_\_\_\_\_ (The group is responsible for cleanup.)

This agreement is executed between the representative of the group, both named above, and the Morris Area Public Library District for use of meeting space within the Morris Area Public Library at 604 Liberty Street, Morris, Illinois 60450. This agreement will be effective for only the dates and times specified above, and for one year only in the case of standing reservations. This agreement is renewable by mutual agreement, and may be cancelled by either party at any time, for any reason. **The Library must be notified as soon as possible when any group will not be using the meeting room on their scheduled day and time.**

The Library has the following equipment available for use in addition to basic access to tables and chairs. Arrangements need to be made to use the equipment. Library Staff will assist with set-up of the equipment. Shut-down and cleanup is the responsibility of the group. All Library-owned equipment must be returned to its original position at the end of the meeting. Please place a check next to any equipment requested by the group.

Podium	_____	Podium
Microphone	_____	Microphone
DVD/VCR Player	_____	DVD/VCR Player
Laser Projector/Screen	_____	Laser Projector/Screen
Dry Erase Board/Supplies	_____	Dry Erase Board/Supplies

The applicant agrees to return the Library facilities to a clean and orderly condition at the end of the activity and to pay the cost of cleaning, repair or replacement of any damage to

the facilities or equipment. The Library will not be responsible for damage or loss of materials used or left in the building.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Approved by Library staff

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

---

**FOR LIBRARY STAFF USE ONLY BELOW THIS LINE**

**BASE FEES FOR MEETING ROOM USE (CHECK ONE)**

\_\_\_\_\_ **RESIDENT--\$0.00**

\_\_\_\_\_ **NON-RESIDENT--\$50.00**

**ADDITIONAL CLEANING OR REPAIRS FEES** \_\_\_\_\_

- **Please attach photo documentation for verification**

**TOTAL FEES DUE** \_\_\_\_\_

**PAID ON** \_\_\_\_\_

\_\_\_\_\_ **CASH**      \_\_\_\_\_ **CHECK**      \_\_\_\_\_ **CREDIT CARD (E-PAY)**

**STAFF COMPLETING THIS FORM**

\_\_\_\_\_