



## Application for Use of Meeting Room

Application for Use of Library:     Community Room     Friends' Activity Room    (check one)  
   (Capacity 100)                          (Capacity 30)

Name of Organization Applying: \_\_\_\_\_

Organization's Representative: \_\_\_\_\_ Title: \_\_\_\_\_  
   (Must be reserved by an adult representative)

Organization     Home    Address: \_\_\_\_\_  
   Check One                          Street                          City                          Zip

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date(s) Requested: \_\_\_\_\_ (Rooms may not be reserved more than one month in advance)

Hours Desired: \_\_\_\_\_ AM PM through \_\_\_\_\_ AM PM                          Total Hours: \_\_\_\_\_  
   (Events must be concluded 15 minutes prior to library closure)

Type of Activity: \_\_\_\_\_

Anticipated Attendance: \_\_\_\_\_ Open to Public:     Yes     No  
   (If the room is not open to the public Category 3 or 4 fees will apply)

**Check Fee Category which applies:**

Category 1	No Charge	Library uses and co-sponsored programs	Library sponsored or co-sponsored cultural events, library programming and library educational events
Category 2	No Charge	<b>Canton Resident or Canton based</b> Educational, Cultural, Informational or Governmental/Civic Activities, Non-Profit 501(c)(3) organization	Canton homeowners associations, public lectures, panel discussions, workshops and other similar functions serving Canton residents.  501(c)(3) documentation may be required.
Category 3	\$50.00 per session (up to 4 hours)	For-Profit Organizations/Businesses <b>within</b> Canton	For-profit businesses of Canton residents – or – Businesses located within Canton.
Category 4	\$200.00/per session (up to 4 hours)	Non-Resident	Non-Resident groups, individuals or organizations including Non-Profit 501(c)(3).
Category 5		No usage permitted	For-profit groups or organizations soliciting or selling products or services are not eligible to use library meeting rooms.
<b>Additions</b>	<i>\$25.00 Kitchen / Cleaning Deposit</i>  <i>\$50.00 Equipment Rental Fee</i>		<b>Depending on the nature of the event (craft, food service, etc.) a \$25 cleaning deposit may be required.</b> The Community Room kitchen is not intended for cooking, but to provide a convenient space for the preparation of ready-to-serve items or light refreshments. No meals may be served.  Projector, laptop, DVD player, microphone, presentation remote, extension cord. <b>Equipment rental fee is non- refundable.</b>

Sponsoring individuals and organizations agree to and shall indemnify, defend and hold harmless, Canton Public Library and its appointed officials, boards, committees, agents and employees (collectively, the "library") against all suits, actions, demands, damages, and expenses of any nature which may be brought or made against the library or which the library may pay, sustain, or incur by reason of the use of the library facilities by sponsoring individuals or organizations.

Authorization to use library facilities may be revoked by the Library Director or designee upon violation of any policy, rule or procedure. A written appeal of the decision may be made by the complainant to the Chair of the Library Board within 10 business days. The Library Board will review the documentation and render their decision within 60 days of receipt of the complainant's appeal.

Canton Public Library Board of Trustees  
1200 S. Canton Center Road  
Canton, MI 48188  
<http://cantonpl.org/aboutus/board>

**I HAVE READ AND UNDERSTAND THE POLICY ON THE USE OF THE CANTON PUBLIC LIBRARY MEETING ROOMS AND AGREE TO ABIDE BY ITS REGULATIONS.**

Printed Name  
Of Applicant:

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Signature  
Of Applicant:

Date:

(Must be signed by an adult representative)

Approved By:

Date:

(Library Director or Designee)

***Office Use Only***

Date Application Received: \_\_\_\_\_

Date Room Charge Received: \_\_\_\_\_

Date Application Approved: \_\_\_\_\_

Check No. \_\_\_\_\_

Date Approval Email Sent: \_\_\_\_\_

Date Equipment Charge Received: \_\_\_\_\_

Check No. \_\_\_\_\_

Date Cleaning Deposit Received: \_\_\_\_\_

Date Cleaning Deposit Returned: \_\_\_\_\_