AURORA PUBLIC LIBRARY MEETING AND CONFERENCE ROOM USE APPLICATION

The Aurora Public Library maintains meeting and conference room spaces for guests at these locations: Santori Library, the Eola Road Branch, and the West Branch. These spaces are available for use by others when not needed for Library functions or its business.

The Library welcomes the use of its meeting and conference rooms by nonprofit organizations engaged in informational, educational, cultural, and civic activities. Meetings and workshops for local for-profit and commercial organizations are also welcome, subject to the parameters of our policy. Permission to use meeting or conference rooms does not imply endorsement, support, or co-sponsorship by Aurora Public Library of the group’s policies or beliefs or activities. As such, the Library excludes the use of our facilities for political rallies, religious services or events, or activities that materially and substantially interfere with the function, purpose and mission of the Aurora Public Library.

The sale, advertising, solicitation or promotion of products or services is not allowed in Library meeting or conference rooms without the prior, express permission of the Executive Director.

FEES AND ASSESSMENTS

Fees allow the Library to recover costs associated with usage and maintenance. Fees listed are per hour, and meeting and conference rooms must be reserved for a minimum of one hour. An additional half hour increment, if requested, will be assessed at the half hour rate. Additional time must be also included in the reservation to accommodate room setup and breakdown. Maintenance fees are incurred for all reservations that require set up. Custodial charges are incurred when food or beverages (other than bottled water) are served.

Meeting or conference room users will be held responsible for any damage to the Library building, grounds, or equipment due to negligence or willful misconduct. Additional fees will be assessed to the group if carpeting must be cleaned or floors polished.

Applications should be submitted no less than fourteen (14) days before the requested event date. Payment must be made in full seven days before the event. No refund is issued for cancellations within seven calendar days of the scheduled meeting. Under certain circumstances, a fee may be waived at the discretion of the Executive Director. Approval of reservations under fourteen (14) days from requested event date are at the discretion of the Event or Branch Coordinator, and full payment of all fees is required immediately upon the reservation’s approval.

<table>
<thead>
<tr>
<th>Facility Description</th>
<th>Nonprofit (501c)(3) organization*</th>
<th>Nonprofit An additional 1/2 hour only</th>
<th>For-profit organization</th>
<th>For-profit – An additional 1/2 hour only</th>
<th>Room setup fee (Santori only)</th>
<th>Custodial flat fee (if food or beverages are served)</th>
<th>Deposit required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting or Conference Room (per room)**</td>
<td>$18 /hour</td>
<td>$10</td>
<td>$35 /hour</td>
<td>$20</td>
<td>$20</td>
<td>$35</td>
<td>50%</td>
</tr>
<tr>
<td>Computer Training Lab (Santori only)</td>
<td>$50/hour</td>
<td>$20</td>
<td>$100/ hour</td>
<td>$75</td>
<td>$20</td>
<td>N/A</td>
<td>$300</td>
</tr>
</tbody>
</table>

*All fees are inclusive of the use of Library service personnel.

**Meeting or Conference Room includes the use of a multipurpose room, the meeting area, and two white boards.

Aurora Public Library – Meeting and Conference Room Use Application - August 2015
A nonprofit group must submit a copy of its 501c3 status with its application to be eligible for the lower fee assessment.

** Technology may be available for meetings, depending on location. Direct questions to the Events or Branch Coordinator.

**APPLICATION FOR MEETING ROOM USE**

Organization Name  ______________________________________________________

Organization Address  ______________________________________________________

__________________________________________________________________________

Email contact  ______________________________________________________________

Organization Type (select one)

Nonprofit (with 501c designation) _____  Governmental _____  Business / for profit _____

Purpose of Meeting  __________________________________________________________

Will fees be charged to attendees?  YES _____  NO _____

Meeting Date  __________  Meeting Start Time  __________  Meeting End Time  __________

Preferred Library location  Santori _____  Eola Road Branch _____  West Branch _____

Number of expected attendees  __________

Will food or beverages be served?  YES _____  NO _____

(Bottled water and covered beverage containers are allowed in rooms at Santori, Eola Road Branch, and West Branch at no additional charge. If your meeting includes other food items to be served, custodial charges do apply.)

**Santori Library Location only:**

Does your meeting require specific technology in the meeting space? Please specify. Technology may or may not be available.

__________________________________________________________________________

__________________________________________________________________________

Requested room set up / configuration? Does your group require work tables, chairs only, etc.?

__________________________________________________________________________

(The Santori Events Coordinator will discuss final set up with your group’s representative.)
LIABILITY FOR USE OF FACILITY

The undersigned client (the authorized representative of the organization requesting this reservation), on the date and time specified, hereby expressly agrees to indemnify and hold Aurora Public Library harmless from all claims, actions, suits, proceedings, costs, expenses, damages, and liabilities, including attorneys fees arising from, or resulting from occupancy or use of Aurora Public Library premises by the requesting organization.

Organization Officer / Authorized Representative

Name __________________________________________
Title __________________________________________
Address _______________________________________
Telephone ______________________________________

Signed and dated this ___________ of ___________, 20_________
Signature __________________________________________

Authorized representative (person to be present at all times during meeting)
________________________________________
Address _______________________________________
Telephone ______________________________________

Return form to the Events or Branch Coordinator of the Library location where the meeting space is requested. The Library will notify you of its decision via email. Reservation deposit, if applicable, will be due within 5 business days of the email receipt.

STAFF USE ONLY

Approved: _______________________________________
Modifications or restrictions: ______________________________
Disapproved: _______________________________________
Reason for disapproval: ______________________________
Authorized Library Representative: _______________________
Date confirmed: _____________ Date entered in Library Insight: _____________
Location and room(s) reserved: ______________________________
Date deposit (if required) received: __________________________