## Cadillac Wexford Public Library

## Application to use the Meeting Room

Date of request		
Date of use	Time of use	to
Name of Corporation/Organizatio	n/Individual	
Street address		
City and State	Zip code	
Telephone		
Purpose of meeting or program _		
Number attending		
By signing this Application, the Cagrees to indemnify and hold har employees, officers and represe demands of any character or naturdamages sustained by any persor Room, its furnishings or equipmeeting. The Corporation, Organ caused by its use of the Meetin Organization, the person signing to behalf of the Corporation or Organization or Organizatio	rmless the Cadillac Wexford Publications, from any and all suite arising out of or brought on according as a consequence or result of the theorem is a consequence or any personalization, or Individual also agrees and Room. If signing on behalt this Application agrees that he/sh	olic Library, its agents its, actions, claims, or count of any injuries of the use of the Meeting in attending the User's to pay for any damage of of a Corporation of
Name of responsible person		
Signature of responsible person _		
Approved	Date	