

Date of Application: \_\_\_\_\_

**Check One:**

- Orange Public Library & History Ctr. Room A&B       El Modena Community Room  
 Orange Public Library & History Ctr. Room A only       Taft Salter Annex Community Room  
 Orange Public Library & History Ctr. Room B only       Rotary Conference Room

**Check One:**    Non-Profit 501(c)(3): \_\_\_\_\_       For Profit

Name of Group \_\_\_\_\_

Address: \_\_\_\_\_ Anticipated Attendance: \_\_\_\_\_

Authorized Rep.: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Name and Title

Email Address: \_\_\_\_\_

- Is this meeting free of charge to attendees?* Yes  No       *Is your group non-sectarian?* Yes  No   
*Are you soliciting any sales or donations?* Yes  No       *Is your group non-partisan?* Yes  No   
*Is this meeting open to the public?*                      Yes  No

Date(s) of Meeting: \_\_\_\_\_ Reserved Time: From \_\_\_\_\_ To \_\_\_\_\_  
Including Set-up                      Including Clean-up

Room: \$ \_\_\_\_\_ x \_\_\_\_\_ = \$ \_\_\_\_\_ + \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
Per Hour                      # of Hours                      Total Fee                      Deposit                      Total for Room

Equip: \$ \_\_\_\_\_ x \_\_\_\_\_ = \$ \_\_\_\_\_ + \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
Flat Fee                      # of Equip                      Total Fee                      Deposit                      Total for Equip

Paid:    Cash    Credit Card    Check # \_\_\_\_\_ (Payable to City of Orange)      **Grand Total: \$** \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date (MM/YY) \_\_\_\_\_

Billing address house number and zip code associated with credit card \_\_\_\_\_

**Certificate of Insurance Required by Risk Manager**   Yes    No

(An endorsement naming the City of Orange as Additional Insured must be provided with Certificate of Insurance)

**HOLD HARMLESS AGREEMENT**

The group or organization listed above agrees that to the fullest extent permitted by the law, they will defend, indemnify and hold harmless the City of Orange against claims, damages, losses or injuries to persons or property, excluding any wrongful, intentional, malicious acts or negligence of the City or Orange, its officers, employees, or agents. This would include, but not be limited to, attorneys and consultant fees, legal costs, expenses and fees arising out of or resulting from the use of the City meeting room by said group or organization or by its officers, employees, agents, guests or invitees. This indemnification includes, but is not limited to, any wrongful, intentional, or malicious acts or conduct of the group or organization using the City meeting room, or by its officers, employees, agents, guests or invitees.

I have read, understand and agree to all conditions and requirements of:

- Hold Harmless Agreement                       Library's Meeting Room Use Policy  
 Library's Room Use Agreement                       City's Insurance requirements

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

**Approved by Meeting Room Coordinator:**

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_