Community Room Fee Schedule

<table>
<thead>
<tr>
<th>Event Description</th>
<th>Room Fee (2 hour standard rental)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Library Events</td>
<td>No charge</td>
</tr>
<tr>
<td>Events held by Sunderland town boards or committees, or by Sunderland-based civic organizations (for example, Sunderland Woman’s Club, Sunderland Youth Baseball, Swampfield Historical Society, and programs sponsored by the Sunderland Cultural Council)</td>
<td>No charge*</td>
</tr>
<tr>
<td>Events sponsored by nonprofit individuals or non-Sunderland-based groups for which no fee is charged</td>
<td>No charge*†</td>
</tr>
<tr>
<td>Events sponsored by nonprofit individuals or non-Sunderland-based groups for which a fee is charged</td>
<td>$20†</td>
</tr>
<tr>
<td>Events sponsored by for-profit individuals or groups for which no fee is charged</td>
<td>$50†</td>
</tr>
<tr>
<td>Events sponsored by for-profit individuals or groups for which a fee is charged</td>
<td>$100</td>
</tr>
<tr>
<td>Private Parties</td>
<td>Not permitted</td>
</tr>
</tbody>
</table>

* Donations to the Sunderland Public Library for use of the Community Room are greatly appreciated.
† By vote of the Sunderland Public Library Board of Trustees, the number of weekly reservations in these categories is limited.

Sunderland Public Library Community Room Registration Form

Rental Date Requested: ______________________________________________________________

Time Requested: Start: _____________________________ End: _____________________________

Description of Person or Organization Requesting Rental (i.e., for-profit business, nonprofit organization, civic organization, for-profit individual, etc.):

________________________________________________________________________

Name of Sponsoring Organization or Individual:

________________________________________________________________________

Name of Person Responsible for Rental:

________________________________________________________________________

Description of Proposed Event:

________________________________________________________________________

Equipment Needed:

Chairs (number) __________

Tables (number) __________

TV ______________________

VCR ______________________

DVD ______________________

Screen ______________________
Sunderland Public Library Community Room Registration Form

(continued)

I certify that I am an officer of the above named organization; that I have the authority to reserve the Community Room; and that the above statements are true to the best of my knowledge and belief.

I hereby agree that the applicant will be responsible for any damage caused by the applicant to the library premises, and furnishings because of the use of said premises by the above applicant, and agree to pay for said damages as assessed by the Library Board of Trustees.

I have read and agree to abide by and uphold all rules and policies of the Sunderland Public Library governing the use of library premises, including regulations prohibiting charging an entrance fee, soliciting donations, or limiting attendance.

I also agree to release, acquit, discharge, any and all claims or rights of action for any personal injuries or property damage which may occur as a result of the use of the above premises. I further agree to protect, save, and keep the Town of Sunderland, the Board of Trustees, the Library Director, their agents and employees forever free and harmless and indemnified against and from any and all loss, cost, or expense arising out of or from any accident or other occurrence causing injury to any person or property whomsoever or whatsoever as a result of the use of the above premises.

Date _______________________________________
Signature ____________________________________  Title ________________________________

Print Name  _________________________________________________________________________
Address  ____________________________________________________________________________
Phone _________________________________________ Fax ________________________________

Community Room Fee:

Donation:

Total:

(checks made payable to the Sunderland Public Library)

For Staff use only:

Reservation:  Approved  Unapproved
Amount Paid  ____________________________________________________________
Library Director’s Signature  ________________________________________________
Date  ________________________________________________________________