Jefferson County Library
241 SE 7th Street
Madras, OR 97741
(541) 475-3351
http://www.jcld.org

Rodriguez Annex Use Contract

*Please fill out all info in top **RED** box and any other that apply.*

Name (renter or organization's) (please print) :	
Contact person (if different from above) :	Phone number :
Today's date :	Date & Time of rental :
Hours of event (including setup and cleanup) :	
Space to be reserved/use: (please check) ☐ Upstairs Main Room ☐ Downstairs Main Room ☐ Kitchen ☐ Day Care Room	

Rental Charges for Commercial use:

Deposit: (upstairs or downstairs) *required for commercial use*	$ 150.00 = $ 150.00 Check # _____ • Deposit reserves your rate and hours. All costs must be paid before you receive keys. • Deposit to be paid at time of reservation and all other costs in advance of event. • The deposit check will be returned after the event, if there is no damage or clean up required. • If the deposit check is not picked up, it will be destroyed in one week.
Cost of rental:	$ 20.00 / hr x _____ hrs = $ _____

Other optional rental fees

Deposit (kitchen)	$ 50.00 = $ _____
Cost of rental: (kitchen)	$ 5.00 / hr x _____ hrs = $ _____
Day Care Room	$ 5.00 / hr x _____ hrs = $ _____
Film Equipment (Arrange for time & dates with projectionist)	$ 25.00 / hr x _____ hrs = $ _____ (max of $ 50.00 /day)
	Total Fees collected = $ _____ Check # _____ **Date Paid =** _____

RENTER HEREBY AGREES TO HOLD HARMLESS AND INDEMNIFY JEFFERSON COUNTY LIBRARY DISTRICT BOARD, EMPLOYEES AND REPRESENTATIVES FROM ANY AND ALL INJURIES, CLAIMS, DAMAGES OR CAUSES OF ACTION ARISING OUT OF RENTER'S USE OF FACILITY.

I have read the rental policies and procedures and understand that I am responsible for the conduct of all persons in attendance at the above listed event, for safekeeping of the facility and for prompt payment of all required charges. Information given is true to the best of my knowledge. I also acknowledge that if I do not conform to all rules and regulations that I will forfeit my deposit.

Signature of Renter : _____ Date : _____