

REHOBOTH BEACH LIBRARY MEETING ROOM  
APPLICATION FORM  
(Please Print)

Date: \_\_\_\_\_

Name of Organization \_\_\_\_\_

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Telephone # \_\_\_\_\_ email address \_\_\_\_\_

Date Requested \_\_\_\_\_ Time \_\_\_\_\_

Type of Program or Purpose \_\_\_\_\_

Kitchen Usage? (circle) YES NO Expected Attendance \_\_\_\_\_

Nonprofit Organization? (circle) YES NO IF yes give IRS ID# \_\_\_\_\_

Please attach copy of Liability Insurance

APPLICANT ACCOUNTABILITY/RESPONSIBILITY AGREEMENT

I have read the Rehoboth Beach Library Meeting Room Policy and Rules. "The undersigned assumes all and exclusive responsibility for the preservation of order and the sole and exclusive liability for any injury of persons, and damages to, or loss of property that may result from this use; and for the due observance of all regulations of the Board of Trustees of the Rehoboth Beach Library and acknowledges receipt of the regulations regarding the use of the meeting room."

APPLICANT SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

Please return application to: Rehoboth Beach Public Library  
226 Rehoboth Avenue  
Rehoboth Beach, DE 19971

Or fax to: (302) 227-0597

Board of trustee approval \_\_\_\_\_ Date \_\_\_\_\_

Fee \$ \_\_\_\_\_