

# Presque Isle District Library Rogers City Theater Rental Agreement

Responsible Party/Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name of Organization/Business: \_\_\_\_\_

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

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

Non-Profit:  Private Business:  Other Organization:

Please attach proof of non-profit status to this agreement form.

Rental Option: Facility Only  Facility and Film

Purpose of Rental: \_\_\_\_\_

Times requested for use: Please include set-up time if applicable.

Monday: \_\_\_\_\_

Tuesday: \_\_\_\_\_

Wednesday: \_\_\_\_\_

Thursday: \_\_\_\_\_

Friday: \_\_\_\_\_

Saturday: \_\_\_\_\_

Sunday: \_\_\_\_\_

Anticipated Attendance \_\_\_\_\_ (Please be sure to fill out an attendance sheet on the day of the event)

**Do not have any equipment needs**

**Library Equipment Needed (Check all that apply below)**

\*Charge may be assessed for special equipment-please arrange ahead-all payments to be made at time of meeting or before, unless prior payment arrangements have been made.

\_\_\_ Concessions \_\_\_ Screen \_\_\_ DVD Player \_\_\_ LCD Projector \_\_\_ Laptop or Computer Equipment\*

\_\_\_ Microphone and Speakers \_\_\_ Supplies\*

The undersigned agrees to the terms and conditions set forth in the attached Rogers City Theater usage Policy.

\_\_\_\_\_  
Authorizing official representing "The Renter" (signature required) Print Name

\_\_\_\_\_  
Authorizing official representing Presque Isle District Library (signature required)

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