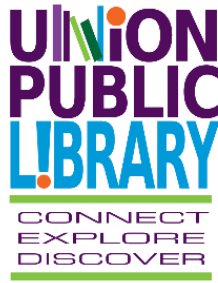


1980 MORRIS AVENUE  
UNION, NEW JERSEY 07083  
TEL: 908-851-5450  
FAX: 908-851-4671  
www.uplnj.org



123 HILTON AVENUE  
VAUXHALL, NEW JERSEY 07088  
TEL: 908-851-5451  
FAX: 908-349-8849  
www.uplnj.org

## APPLICATION FOR USE OF THE MEETING ROOM UNION PUBLIC LIBRARY

The undersigned agrees to assume responsibility for the preservation of order at said location and liability for any damage thereto and for the observance of all policies, rules and regulations of the Union Free Public Library and further release of Union Township, the Union Township Free Public Library, and their respective officials, employees, and agents (collectively the Township parties) from any liability, of any kind whatsoever arising out of participation, organization and/or sponsoring of said activity.

For-profit organizations who use our meeting room must provide the Union Public Library with a certificate of insurance in the amount of 1,000,000 dollars when they submit the Meeting Room Application Form for approval. No for-profit organization may use any of the Library's meeting rooms without this certificate insurance.

The undersigned is at least 18 years of age and intends to be bound by this application.

**I HAVE RECEIVED AND READ THE UNION FREE PUBLIC LIBRARY'S MEETING ROOM POLICY AND REGULATIONS FOR USE AND UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR MY GROUP OR ORGANIZATION'S ADHERANCE TO SAME.**

Name of Group/Organization: \_\_\_\_\_

Non- Profit Organization (Check one): Yes \_\_\_\_\_ No \_\_\_\_\_

For- Profit Organization (Check one): Yes \_\_\_\_\_ No \_\_\_\_\_

Certificate of Insurance Provided Yes \_\_\_\_\_ No \_\_\_\_\_

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

Phone: \_\_\_\_\_

Name of Individual Making Application: \_\_\_\_\_

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

Title: \_\_\_\_\_

Location Requested: Main Library \_\_\_\_\_ Vauxhall Branch \_\_\_\_\_

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

Purpose for Using the Meeting Room \_\_\_\_\_

Approximate Size of Group Expected \_\_\_\_\_

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FEES: Profit-Making Organizations \$135.00  
Not-for-Profit Organizations & Groups, Civic Groups, & Church Groups – None

LIBRARY HOURS:

Main Library      Monday, Tuesday & Thursday      10:00am-9:00 pm  
   Wednesday                                         10:00am-6:00pm  
   Friday & Saturday                                 9:00am-5:00 pm  
   Closed Saturday during July and August

Vauxhall Branch      Monday & Wednesday                             1:00pm-9:00pm  
   Tuesday & Thursday                               10:00am-6:00pm  
   Friday     Closed  
   Saturday     9:00-5:00pm  
   Closed Saturday during July and August

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**For Administrative Use Only**

Certificate of Insurance Received (if applicable):      Yes \_\_\_\_\_      No \_\_\_\_\_

Meeting Room Use Fee (if applicable):                                 Yes \_\_\_\_\_      No \_\_\_\_\_

MAIN LIBRARY MANAGER  
(APPROVED/REJECTED) \_\_\_\_\_ DATE: \_\_\_\_\_

VAUXHALL BRANCH MANAGER  
(APPROVED/REJECTED) \_\_\_\_\_ DATE: \_\_\_\_\_

LIBRARY DIRECTOR  
(APPROVED/REJECTED) \_\_\_\_\_ DATE: \_\_\_\_\_

*Revised: December 2014*

*Union Public Library Board of Trustees: Approved, December 16, 2014*

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