

Facility / Room Rental Agreement at the North Grenville Public Library

P.O. Box 538, 1 Water Street, Kemptville, ON K0G 1J0

613-258-4711 (phone) 613-258-4134 (fax)

info@ngpl.ca

Contact name	
Address	
Telephone	
E-mail address	
Organization name (if applicable)	
Use of room	
Date and time requested	
Room requested (Tallman or Carnegie)	
Special requirements	

Is your meeting or event open to the public? (Yes or No) _____

The undersigned has read and on behalf of the Lessee agrees to be bound by this Application and the Terms and Conditions as set out in the NGPL Facility Rental document, and hereby warrants and represents that he/she executes this Agreement on behalf of the Licensee and has sufficient power, authority and capacity to bind the Licensee with his/her signature.

Signature: _____

Date: _____

Date and time have been confirmed by staff (initial): _____

Staff Use: Please complete form when payment is made, photocopy and give to patron

Payment required: _____ Date: _____

Cheque: _____ OR Cash: _____