PALOS VERDES LIBRARY DISTRICT

APPLICATION FOR USE OF THE PENINSULA CENTER LIBRARY - COMMUNITY ROOM

701 Silver Spur Road, Rolling Hills Estates, CA 90274 (310) 377-9584 x 247

Organization		Date of Application:			
Purpose of Meeting	Expected Attendance:				
Day of Week	Date of Event	Time	to		
Contact Person	Email Address		Total # of hours:		
Address	C	ity, State, Zip			
Business Telephone: ()	н	lome Phone: ()			
Check One Below: This rental has a three clean-up time. For other considerations made at least two weeks prior to event facility after hours.	s, please contact Administrati	ion. Fees are payable at time	e of reservation. Cancellations		
□ Not-for-profit, open to the public mee	eting, facility open	\$20/hr.; 🗆 facilit	y closed\$75/hr.		
\Box Not-for-profit, closed to the public me	eeting, facility open	\$75/hr.; 🗆 facilit	y closed\$100/hr.		
Not-for-profit, private memorial servi	ces, facility open	\$130/hr.; 🗆 facilit	y closed\$250/hr.		
□ Not-for-profit private social parties/re	eceptions, facility open	\$130/hr.; 🗆 facilit	y closed\$250/hr.		
□ For-profit users or organizations, oper	n-to-the-public, facility open	\$75/hr.; 🗆 facilit	y closed\$100/hr.		
$\hfill\square$ For-profit users, closed to the public,	or charge to attend, facility op	oen\$135/hr.; 🗆 facili	ty closed\$175/hr.		
□ For-profit private social parties/recep	tions, facility open	\$300/hr.; 🗆 facili	ty closed\$350/hr.		
□ Weddings (three-hour minimum plus	security deposit)		\$450/hr.		
Check for use with rental at NO CHARG	iE:				
Easel White Board w/ marker	□ Podium with Mic	Flipchart 🗌 Other			
Check for use of additional equipment,	priced as "Per Use":				
□ Multiple Microphones - \$30 □ Win	reless Microphone - \$30 🛛 🗆 Co	onference Phone - \$30	Please bring presentation on flash drive if renting library		
🗆 Laptop & Projector - \$30 🛛 🗆 Projec	tor - \$30 (Mac/PC)	Piano - \$35	laptop and projector.		
PAYMENTS ACCEPTED IN CASH, CHECK	OR CREDIT CARDS.	TOTAL CHARGES	\$		
READ AND SIGN THE ATTACHED MEET The undersigned hereby makes application to the					

information given is correct. The undersigned further states that they have the authority to make this application and agrees that the applicant will assume all responsibility for any infraction of the rules and regulations as stated in the PALOS VERDES LIBRARY DISTRICT MEETING ROOM POLICY. Applicant assumes full responsibility for damage to or loss of equipment or furnishings. The undersigned has read and understands the Library Meeting Room Policy.

Signature of Responsible Party Da		Date	Print Name and I	Daytime Phone Number
Return signed copy to:	Administration Office Palos Verdes Library Dist 701 Silver Spur Road, Ro (310) 377-9584 Ext 247/I	lling Hills Estates, CA	90274	For Office Use Only: (initial all that apply) paid confirmed no charge approved by Director approved by Facilities