PALOS VERDES LIBRARY DISTRICT

APPLICATION FOR USE OF THE MALAGA COVE LIBRARY - GALLERY & GARDEN

2400 Via Campesina, Palos Verdes 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	EmailTotal # of hours:		
Address		_City, State, Zip	
Business Telephone: ()_		Home: ()	
<u>Check One below:</u> This rental is a three-hour minimum, no half hours, and estimated rental should include set-up and clean-up time. For other considerations please contact Administration. Fees are payable at time of reservation. Cancellations made at least two weeks prior to event will be refunded, less a \$45 administrative fee. Four-week notice required for use of facility after hours.			
☐ Not-for-profit, open to t	the public meeting, facility open	\$15/hr.; ☐ facility cl	osed\$70/hr.
☐ Not-for-profit, closed to	the public meeting, facility open	\$70/hr.; 🗆 facility clo	osed\$100/hr.
☐ Not-for-profit private m	emorial services, facility open	\$130/hr.; 🗆 facility (closed\$250/hr.
☐ Not-for-profit private so	ocial parties/receptions, facility open	\$130/hr.; ☐ facility o	closed\$250/hr.
\square For-profit users or organizations, open-to-the-public, facility open\$70/hr.; \square facility closed\$100/hr.			
\square For-profit users, closed -to-the-public, or charge to attend, facility open\$130/hr.; \square facility closed\$175/hr.			
☐ For-profit private social	parties/receptions, facility open	\$300/hr.; ☐ facility c	losed\$350/hr.
Check for use with rental		☐ Flipchart ☐ Other	
Check for use of additional equipment, priced as "Per Use":		Conference Phone - \$30	Please bring presentation on flash drive if renting library laptop and projecto
☐ Laptop & Projector - \$		TOTAL CHA	DOES É
READ AND SIGN THE ATTACHED MEETING ROOM CHECKLIST. A COPY OF YOUR SIGNED APPLICATION WILL BE GIVEN TO YOU. The undersigned hereby makes application to the Palos Verdes Library District for the use of the Gallery & Garden premises and certifies that the information given is correct. The undersigned further states that applicant has 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 Pa	arty Date	Print Name and Daytime Ph	one Number
Return signed copy to:	Administration Office Palos Verdes Library District 701 Silver Spur Road, Rolling Hills Estates, CA (310) 377-9584 Ext 247/Fax: (310) 541-6807	For Office Use Only: (paid 90274	or