PALOS VERDES LIBRARY DISTRICT
APPLICATION FOR USE OF THE PENINSULA CENTER LIBRARY - CONFERENCE ROOM
701 Silver Spur Road, Rolling Hills Estates, CA  90274 (310) 377-9584 x 247

Organization __________________________ Date of Application: __________________________

Purpose of Meeting __________________________ Expected Attendance: __________________________

<table>
<thead>
<tr>
<th>Day of Week</th>
<th>Date of Event</th>
<th>Time</th>
<th>to</th>
</tr>
</thead>
</table>

Contact Person __________________________ Total # of hours: __________________________
Addresss __________________________ City, State, Zip __________________________
Business Telephone: ( ) __________________________ Home: ( ) __________________________

FEES ARE BASED ON AN HOURLY RATE.  NO HALF HOURS.  ESTIMATED HOURS SHOULD INCLUDE SET-UP AND CLEAN-UP TIME.  Fees are payable at time of reservation.  There will be no exceptions.  Cancellations made at least two weeks prior to event will be refunded, less a $10 administrative fee.  Four weeks notice required for use of facility after hours.

Check One:
☐ Not-for-profit, open to the public meeting, facility open--------------------$10/hr.;  ☐ facility closed-----------------------------$50/hr.
☐ Not-for-profit, closed to the public meeting, facility open ---------------$30/hr.;  ☐ facility closed --------------------------$75/hr.
☐ For-profit users, open-to-the-public, facility open----------------------$30/hr.;  ☐ facility closed-----------------------------$60/hr.
☐ For-profit users, closed-to-the-public, or charge to attend, facility open-------$60/hr.;  ☐ facility closed--------------------------$90/hr.

Check all that apply (rental of equipment is priced as “per use”):
☐ Laptop & Projector - $30  ☐ Projector - $30 (___Mac/ ___PC)  ☐ Flip Chart - $15  ☐ Dry Erase Marker - $1
☐ Conference Phone - $30  ☐ Equipment Deposit - $25/ Received _____________, Returned ______________

Check all that apply (use of the following at no charge):
☐ White Board  ☐ Easel  ☐ Other _____________________________________________________

PAYMENTS ACCEPTED IN CASH, CHECK OR CREDIT CARDS.  TOTAL CHARGES $ ______________

PLEASE READ AND SIGN THE ATTACHED CONFERENCE ROOM POLICY.
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 Conference Room premises and certifies that the information given is correct.  The undersigned further states that he/she 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 CONFERENCE ROOM POLICY.  He/she assumes full responsibility for damage to or loss of equipment or furnishings.  The undersigned has read and understands the Library Conference Room Policy.

Signature of Responsible Party __________________________ Date __________________________
Print Name and Daytime Phone Number __________________________

Return signed copy to: Office of the Director
Palos Verdes Library District
701 Silver Spur Road, Rolling Hills Estates, CA  90274
(310) 377-9584/Fax: (310) 541-6807

For Office Use Only: (initial all that apply)
☐ paid _____________
☐ confirmed __________
☐ no charge __________
☐ approved by Director ______
☐ approved by Facilities ______

09/14