

AUDITORIUM USE APPLICATION

NATIONAL MCKINLEY BIRTHPLACE MEMORIAL ASSOCIATION

P.O. Box 121

Niles, Ohio 44446

(THIS FORM MUST BE LEGIBLE. PLEASE PRINT.)

TODAY'S DATE: _____

NAME OF ORGANIZATION: _____

PURPOSE OF MEETING: _____

DATE AND TIME OF MEETING/EVENT: _____ ESTIMATED ATTENDANCE: _____

CONTACT PERSON: _____ PHONE: _____

ADDRESS: _____ EMAIL: _____

Street (No P.O. Boxes)

City

PLEASE ANSWER THE FOLLOWING QUESTIONS:

(PLEASE CIRCLE)

- | | | |
|---|-----|----|
| 1. Is your group a non-profit organization? | YES | NO |
| 2. Is your meeting open to the public? | YES | NO |
| 3. Does your group charge a fee? | YES | NO |
| 4. Are you conducting a course? | YES | NO |
| 5. Are you selling anything? | YES | NO |
| 6. Will you be using our chairs? | YES | NO |
| 7. Will your group be using outside services? | YES | NO |

If yes, explain _____

(florist, rental company, caterer, etc.)

8. Have you read the **AUDITORIUM USE POLICY** attached to this application, and do you agree to its rules? YES NO
9. The second floor and the rest rooms of the auditorium are **not HANDICAP ACCESSIBLE**.

APPLICANTS AUTHORIZED SIGNATURE: _____ DATE: _____

(TITLE IF APPROPRIATE)

Your signature indicates that your organization will be responsible for the repair or replacement of any damage to the room, furniture, or equipment and any items missing from the museum.

AUDITORIUM HOURS: Tue. – Fri. 9 AM – 4 PM. Closed Sat. & Sun. except by special arrangements. Arrangements must be also made for any event that will end or start after 4 PM.

Please note: We will charge a fee of **\$50.00 per hour** to clean the facility after you use it. You will be billed for any damages or loss of property during the use of the auditorium. We will pursue criminal charges for the damage or loss of any property in the auditorium/museum or library.

There will be a minimum **charge of a \$50.00** deposit to the applicant for use of the auditorium for any event.

Parking is limited. Please park on the street during McKinley Memorial Library hours.

For any questions, please call the Museum phone number (**330-652-4273**). Leave a message, clearly stating your name, phone number, and purpose of your call. The answering machine is monitored frequently, and the calls will be returned. You may email your application to us at: director@mckinleybirthplacemuseum.org . A signed copy must be delivered.

Return this application to the post office box above

APPROVED ON _____ AUTHORIZED SIGNATURE _____

DENIED BY _____ DATE _____

COMMENTS _____

Revised 9-1-12 Contact & Hours Information Edited 8-22-18