



Anchorage Public Library
3600 Denali Street
Anchorage, AK 99503
Telephone (907) 343-2975
Fax (907) 343-2930
www.anchoragelibrary.org
EIN: 92-0059987

GROUND S & FACILITY USE AGREEMENT / INVOICE

Area Requested:

Facility: ☐ Wilda Marston Theatre (WMT) ☐ Assembly Chamber (AC) ☐ ER/Chugiak (Study room only)
☐ Public Conference Room (PCR) ☐ Ann Stevens Room/Galleria (AS/G) ☐ Mt View (MVC)
Grounds ☐ Fountain Area ☐ NE Corner (36th Ave. and Denali St.)
☐ Parking Lot: _____ ☐ Other: _____

Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Fax: _____ Email: _____

Estimated Attendance: _____ Facility Rental Fee: _____

For Meeting Rooms (Equipment Needed):

☐ Overhead ☐ Slide ☐ Easel ☐ Piano ☐ TV/VCR/DVD ☐ Podium/Microphone (AC or WMT only)

Date(s) of Event(s) Month/Date/Year Hours (Include set-up & clean up time)

1. _____
2. _____
3. _____

IN ORDER FOR THE LIBRARY TO EVALUATE THIS REQUEST, PLEASE ANSWER THE FOLLOWING QUESTIONS USING
ADDITIONAL SHEETS IF NECESSARY

Purpose of Event: _____

Are any planned activities controversial, disruptive or noteworthy? ☐ Yes ☐ No If yes, please explain: _____

Event open to the public or private: ☐ Yes ☐ No (Events open to the public may require other permits and fees)

Audio/PA Equipment to be used? ☐ Yes ☐ No Other Equipment to be used: _____

Will alcohol be consumed? ☐ Yes ☐ No (** See policy below) (An application for alcohol waiver must be filled out and submitted with this form.) **INSURANCE REQUIRED**

Concession or other sales? ☐ Yes ☐ No (Special permits may be required)

The undersigned representative of the organization who is applying for permission to use library grounds or facilities certifies he/she is 18 years of age or older, has received, read and understands the Grounds or Facility Use Policy, and Grounds & Facility Use Agreement/Invoice. User agrees to abide by the policies and regulations of the Library with regard to use of such facilities and agrees to save, hold harmless and indemnify the Municipality of Anchorage from any claims; lawsuits or judgments arising from loss, damage to property or injury to persons from or during the above described activity(s).

Signature: _____ Application Date: _____

Initial Read Policy: _____

☐ Fax or mail signed Agreement / Invoice to confirm your reservation.

☐ **Please pay from this agreement, no other invoice will be sent.**

☐ Mail rental fee check, payable to: Municipality of Anchorage, to the address shown above.

Items for Review:

Payment in full is due with the return of this agreement if confirming within 30 days of the event. Payment in full is due within 30 days of confirming your reservation for any advance booking. User is liable for full rental fees unless a written notice to change or cancel confirmed reservations is received by the library at least 30 days in advance of a confirmed date. User must check in with Loussac security office on Level 2 prior to any event. State Drivers License or other legal picture identification is required. Identification is returned when security has secured your rental area. **Alcohol may not be served during hours of library operation. If alcohol is to be served at an after hours event, you are required to obtain a permit and to submit proof of liability insurance, to the rental office a minimum of five working days prior to your scheduled event.

Assistive listening devices for the hearing impaired for use in meeting rooms are available and may be reserved with advance notice. The Z.J. Loussac Public Library TDD number is (907) 563-0872. Z.J. Loussac Library meeting rooms are barrier free.

Signature of Library Official: _____ Phone (907) 343-2906/Fax (907) 343-2930

Calendar: _____ Bill for collection: _____ Processed: _____ Paid: _____ Sent Use Policy: _____



Municipality Of Anchorage