



Brodhead Memorial Public Library

Display Case Application and Waiver

Applicant's Name and Contact Information

Name _____

Address _____

Primary Phone _____ Alternate Phone _____

Brief Description and Purpose of Display:

Month you wish to reserve Display Case _____

(Can only be reserved by calendar month)

I, the Exhibitor, have reviewed, understand, and agree to abide by the Brodhead Memorial Public Library's display case policy which governs the reservation and use of the library display case. I agree to assume responsibility for the display and to insure that the display is set up (the first two days of the month) and removed on time (the last two days of the month), and that its contents and design are consistent with the requirements and guidelines set forth in the above-mentioned policy.

I, the Exhibitor, agree that the Library accepts no responsibility for the theft or damage of any display exhibited at the Library, and certify that all persons submitting materials for the display understand and agree to this waiver. I have read and will comply with the Brodhead Memorial Public Library's display case policy.

Exhibitor signature

Date