

OUTDOOR SPACE RENTAL APPLICATION



GLENWOOD-LYNWOOD PUBLIC LIBRARY DISTRICT

19901 STONEY ISLAND AVENUE
LYNWOOD, ILLINOIS
LIBRARY HOURS OF OPERATION:
MON-THUR 9:00AM TO 8:00PM
FRI 9-5
SAT 9AM -1PM



Please complete this form to apply for rental of the Glenwood-Lynwood Public Library District's outdoor space. Submission of this application does not guarantee approval. Applications must be received at least 30 days prior to the event date. Incomplete applications will not be considered. All fees must be paid prior to the event. Please read the accompanying guidelines carefully.

Hours of Use-

- Rental duration includes all setup and takedown time
- Minimum rental period: 1 hour -Maximum rental period: 4 hours

Fees-

- Residents of Glenwood & Lynwood: \$100 per hour
- Non-residents: \$150 per hour.

Deposits and Payment Timeline

- 1st Payment of a minimum \$75 deposit is required at the time of booking for all approved outdoor use reservations.
- The deposit is applied to the 2nd Payment final balance due.

Applicant Information

| | |
|---|--------------------------------|
| <u>Applicant Information</u> | |
| Name: | Email: |
| Address: | Organization (if applicable): |
| City, State, Zip: | Contact Person (if different): |
| Phone: | Contact Phone: |
| GLPLD Library Card (Proof of Residency) | |

Event Details-Please list the "Top Four" dates.

| | |
|--|-----------------------------|
| Date of Event: | Number of Attendees: |
| Number of Hours: | Event Start Time: |
| Description of Event: | |
| Additional Proposed Dates: Option 1: _____ Option 2 _____ Option 3 _____ Option 4 _____ | |
| Will alcohol be served? <input type="checkbox"/> Yes <input type="checkbox"/> No Will food be served? <input type="checkbox"/> Yes <input type="checkbox"/> No Will amplified sound be used? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Acknowledgments

I have read and understand the Glenwood–Lynwood Public Library District's Outdoor Space Rental Guidelines.

I agree to abide by all rules and regulations set forth in the guidelines.

I understand that the Library District is not responsible for any loss, damage, or injury that may occur during the event.

Name: _____

Signature: _____

Date: _____

Fees

| | Resident | Non-Resident |
|---------------------|----------|--------------|
| Rental Fee Per Hour | \$ _____ | \$ _____ |
| Security Deposit | \$ _____ | \$ _____ |
| Remaining Total | \$ _____ | \$ _____ |

Office Use Only

Date Received: _____

Resident: Yes No

Application Approved? Yes No

Non-Resident: Yes No

Received By: _____

Date
Approved/Denied: _____

1st Payment Type & Amount Received:

\$ _____.

Cash

Check Ck# _____

Card Type: _____

Balance: \$ _____.

Director Signature: _____

2nd Payment Type & Amount Received:

\$ _____.

Cash

Check Ck# _____

Card Type: _____

Balance: \$ _____.

(attach receipts)

Thank you for your application! We will contact you within 5 business days.