Exhibits Request Form

Contact person or group: ___________________________________________________________

Address: _______________________________________________________________________

Phone: _________________________________________________________________________

E-mail: _________________________________________________________________________

Requested Dates of Exhibit: _______________________________________________________

Brief description/explanation of the Exhibit (Please attach any photos of proposed items/exhibit):
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Tredyffrin Public Library, Paoli Library, their employees and agents, the Board of Trustees of the
Tredyffrin Township Libraries, and the Township of Tredyffrin shall not be liable to any group,
organization, or person exhibiting in the library. Such group, organization, or person, jointly and
severally, hereby agrees to, and shall indemnify and hold harmless the Tredyffrin Public Library,
Paoli Library, their employees and agents, the Board of Trustees of the Tredyffrin Township
Libraries, and the Township of Tredyffrin from any and all claims, suits, damages, losses, or
injuries which they may sustain, or are alleged to have sustained, while exhibiting at the
Libraries.

☐ I have reviewed and understand the Exhibits Policy of the Tredyffrin Township Libraries.

Printed Name: ___________________________________________________________________

Signature: _______________________________________________________________________

Date: __________________________________________________________________________

Staff use only

Approved: ____________________________

Date of installation: ____________________ Date of Removal: ___________________________

Comments: