

QUILT EXHIBIT REGISTRATION AND WAIVER OF LIABILITY FORM

This certifies that I have read and understand the EXHIBIT AND DISPLAY POLICY of the Alachua County Library District. In signing this Agreement, I consent to honor all sections of this policy.

ORGANIZATION: Quilters of Alachua County Day Guild
PO Box 357012; Gainesville, FL 32635-7012

Contact Person:
Mary Peer 352-359-6642
1503 NW 14th Avenue; Gainesville, FL 32605

BRANCH: MILLHOPPER TOWER ROAD

INSTALLATION DATE & TIME: o/a March 1, 2017 between 9:00 a.m. - noon
DISMANTLING DATE & TIME: o/a March 31, 2017 between 9:00 a.m. – noon

DISPLAY AREA OR CASE: Walls

Guild Member Exhibitor Name: _____

Title of Quilt: _____

Unless the Library is notified in writing to the contrary, it is understood that object(s) on loan may be photographed and reproduced in Library publications and for publicity purposes connected with this exhibition, and that slides of it may be made and distributed by the Library for its use.

In consideration of the opportunity to participate in the display or exhibit function of the Alachua County Library District; and, in recognition of the possible damage or loss which may occur to any exhibit which I may display in the Library, I hereby knowingly, freely, and voluntarily waive any right or cause of action of any kind whatsoever arising as a result of damage, loss or theft from which any liability may or could accrue to either the Alachua County Library District or the Quilters of Alachua County Day Guild, Inc. and their agents individually.

SIGNATURE _____ DATE _____

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|-----------------------------|---|
| <i>For Library Use Only</i> | |
| Approved by: _____ | Date: _____ |
| Department: _____ | Insurance Statement Attached YES ___ NO ___ |