



Little Falls Public Library  
 8 Warren Street  
 Little Falls, NJ 07424  
 973-256-2784

**Little Falls Public Library  
 Exhibit/Display Release Agreement Form**

I agree that I have read and will abide by the rules of Little Falls Public Library Exhibits and Displays Policy. I agree to hold the Little Falls Public Library, its Board of Trustees and Staff, and the Township of Little Falls harmless from any and all liability, including damage or loss of property which is on loan or on display in the Little Falls Public Library.

Provider Name (First/Last): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Description of exhibit or display:** Please provide a detailed description of material(s), including any relevant identification numbers or details that uniquely identify the exhibit item(s) or item(s) on display.

\_\_\_\_\_  
 \_\_\_\_\_

**Number of pieces on display:** \_\_\_\_\_

**Duration/Exhibit date(s) requested:** This agreement shall be effective as of \_\_\_\_\_ and shall remain in effect until \_\_\_\_\_ unless terminated earlier by mutual written/agreement or for cause.

**Use of Materials:** The Library agrees to use the materials solely for the purpose specified above and not for any other purpose without the prior written consent of the material(s) provider.

**Ownership:** The Provider retains all ownership rights, title, and interest in and to the materials provided under this Agreement.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

*Little Falls Public Library use only*

Approved by: \_\_\_\_\_

Date of approval: \_\_\_\_\_

***The signed original form should be kept with the library. A copy of the signed form should go to exhibitor.***