

BEDFORD TOWNSHIP BRANCH LIBRARY RECORDING STUDIO USE AGREEMENT

I, _____, understand that by using the Recording Studio at the Bedford Township Branch Library I am responsible for the Studio and all of its components. I will reimburse the Bedford Township Library Fund for any equipment damaged, lost or stolen within the time frame that the space is reserved in my name. Library staff will complete a checklist at both the beginning and end of a recording period to ensure that all equipment is accounted for.

I understand that the studio and all of its contents are for in-house use only and cannot be removed from the facility. I will not leave the studio unattended while it is reserved in my name. If I must leave the area, I will be sure to ask library staff to lock the Studio while I am away.

I agree that I will not alter any settings or configurations on the laptop computer that is included in the Studio and that the only changes I am allowed to make are to the adjustment of the camera and microphones to suit my recording purposes. I understand that I must save my recording to my own personal SD card to take with me and that I must upload my recording while not connected to the library's internet.

I agree that the reservation period for the Studio is limited to two hours. Should I need longer than that, I must communicate with library staff how much time I require. I understand that recording must be completed and check out with library staff must happen at least 30 minutes prior to closing time. I understand that the library will not be held responsible for any damage or loss of data or media due to any cause while using the Recording Studio.

I understand that Library wireless connections are not secure, and I will take appropriate caution with personal information while using library equipment. I also understand that I am expected to abide by the same Internet Services and Acceptable Use Policies, as well as all Monroe County Library System policies, while using the Recording Studio.

By signing this document, I verify that I have read and understand the Bedford Township Branch Library's Recording Studio agreement as well as the Patron Behavior and Internet Services and Acceptable Use policies of the Monroe County Library System.

Name: _____ Library Card #: _____

Please Print

Signature: _____ Date: _____