



# Stanislaus County Law Library

Jeffrey R. Olson, President ~ Honorable Marie Sovey Silveira, Secretary ~ Janice A. Schmidt, Director

## STANISLAUS COUNTY LAW LIBRARY APPLICATION FOR AFTER-HOURS ACCESS

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

FIRM NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TELEPHONE:(business) \_\_\_\_\_ (residence) \_\_\_\_\_

(FAX) \_\_\_\_\_

BAR CARD NUMBER: \_\_\_\_\_ (copy attached)

In consideration of the approval for after-hours use of the library, Applicant agrees to indemnify, defend, protect and hold Library and its officers, employees and volunteers, harmless from and against all claims, damages, losses, judgments, liabilities, expenses and other costs, including litigations costs and attorney fees, arising out of, resulting from or in connection with, either directly or indirectly, the Applicant's use of the Library. Applicant agrees to pay for all damage to the Library and any personal property in the Library that is directly or indirectly caused by the Applicant's use of the Library.

I have read the After-Hours Access Policy and I agree to abide by its provisions. I hereby declare under penalty of perjury that the information stated in this application is true and correct.

\_\_\_\_\_ (signature)

CARDKEY # \_\_\_\_\_

FEE COLLECTED: \_\_\_\_\_