

# APPLICATION TO USE LENTZ PUBLIC HEALTH CENTER MEETING ROOMS

During normal MPHD business hours, Lentz Public Health Center Centennial A, B and C meeting rooms (off the lobby) are available to established, local, non-profit organizations of a public, civic, educational or cultural nature, and to governmental agencies. Groups may not charge admission, fees for services rendered, solicit donations, collect dues or membership fees. Sales activities may not be conducted in any of the rooms or on the Lentz grounds. This form must be signed and approved by appropriate MPHD personnel before a meeting room booking will be confirmed.

Organization (Full name): \_\_\_\_\_

Program Name and Type: \_\_\_\_\_

Contact Name and Address: \_\_\_\_\_

Contact Phone — Work: \_\_\_\_\_

Home: ontact \_\_\_\_\_

FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Expected Number of Attendees: \_\_\_\_\_

Needs:    A-V hookup help    Yes    No    Conference Phone    Yes    No    Tables for food    Yes    No

(Permitted Caterers ONLY)

List of Food and/or Equipment that Will Be Brought Into the Building: \_\_\_\_\_



**Open Rectangle**  
20 attendees max per rm



**Closed Rectangle**  
24 attendees max per rm



**Classroom**  
32 attendees max per rm



**Auditorium/theater**  
50 attendees max per rm

DATE AND TIME MEETING ROOM REQUESTED				
DAY OF THE WEEK	MONTH	DATE	HOURS	
			FROM	TO

**INSURANCE NOTICE:** MPHD is not responsible for any property, personal or otherwise brought onto or into any of its premises. The User is responsible for all such property and specifically waives any subrogation rights against MPHD or Metro government. Further, the User is responsible for any negligent personal injury or property damage caused by the User or any member of the User's group of attendees while on MPHD premises. The User agrees to hold harmless MPHD and the Metropolitan Government of Nashville and Davidson County for any personal injury or property damage caused by the User or any of the User's attendees.

I have read and understand the rules of MPHD under this application regarding the use of MPHD meeting room facilities and, as an authorized representative from the above organization, guarantee compliance with said rules. I agree that the group I represent will abide by these rules. I will submit 501(c) (3) documentation, if requested.

**Signature & Date:** \_\_\_\_\_

### STAFF USE ONLY

Director/Designee Approved (initials): \_\_\_\_ Yes \_\_\_\_ No    Comments: \_\_\_\_\_

Director/Designee Signature & Date \_\_\_\_\_

Staff Taking Request & Date \_\_\_\_\_

MPHD Policies Nov. 04, 2014

**Public wireless only for network connection. Laptops for AV must be provided by user.**

(Pop-up blockers may prevent)

**Or, save a copy and send by e-mail to:**  
**Thomas.Sharp@nashville.gov;**  
**Martha.Bickley@nashville.gov;**  
**Mark.Sturgis@nashville.gov;**  
**Terry.Grimes@nashville.gov**

June 16, 2016