COMMUNITY SOUTHERN BANK
A New Direction In Banking

Community Room Application *(revised 3-2010)*

Name of Organization_____

Mailing Address_____

Phone Number_____ Fax_____ E-mail _____

Type of Account(s) Currently Held With CSB:

☐ Checking ☐ Savings ☐ Business Checking ☐ Money Market ☐ Other

Designated Security Officer _____

Mailing Address_____Home Phone_____

Cell Phone_____Business Phone _____Fax_____

Designated Alternate Security Officer _____

Mailing Address_____Home Phone_____

Cell Phone_____Business Phone _____Fax_____

Date Requested_____ M/T/W/T/F DURING BANK HOURS Yes/No

Time Requested From: _____ AM/PM To:_____ AM/PM

Approximate Number of People Attending Meeting/Event: _____Minimum
_____Maximum

Purpose: ☐ Organization Meeting ☐ One-time Event/Other

Not For Profit - Purpose/Mission

_____

Profit – Product/Service

Designated Security Officer _____ and Alternate Security Officer _____, have been duly authorized by _____ (Name of Organization) to sign on behalf of the organization for the use of the CSB Community Room.

Security Officer Signature_____ Date ___ _____

Alt. Security Officer Signature _____ Date _____

Application Reviewed By_____ Date _____

- -

CSB Officer Approval _____ Date _____

Community Room

Authorization for Use of Room
And
Entry Key(s) Authorization

Name of Organization: _____

Date(s) of Use: _____

Designated Security Officer: _____

Designated Alternate Security Officer: _____

As Designated Security Officer and Designated Alternate Security Officer for the above mentioned organization, we hereby agree to abide by all banking rules and regulations, and acknowledge receipt of and accept responsibility for the use of the following key (s):

Entry Key	Date Issued
_____	_____
_____	_____

We agree to return the keys, after use of the room, to Community Southern Bank either to the Receptionist or an Officer of the Bank (during regular business hours) or, we will drop them in the night deposit box (after regular business hours) along with the required Sign-In Sheet.

_____	_____
Security Officer	Date
_____	_____
Alternate Security Officer	Date
_____	_____
Bank Officer	Date

Community Room

"Rules for Use"

Thank you for your interest in our Community Room! CSB is proud to have this facility to offer the citizens of this community and will strive to ensure that it is well maintained for your use. Therefore, we ask that your organization read our "Rules for Use" over carefully and that its members abide by these rules. By working together, this beautiful facility will remain an asset to our community for many years to come. Your assistance and cooperation is very much appreciated!

1. Each organization should assign a Security Officer who will be the responsible party for your organization and should also assign an "Alternate" Security Officer.
2. A key will be issued in the name of the organization with authority for use assigned to the organization's Security Officer and Alternate Security Officer.
3. All organizations must receive prior approval for use of any equipment belonging to Community Southern Bank.
4. Organizations must agree to clean and vacate the room when their reserved time slot has ended, removing all items and debris and returning the room to the condition in which it was found. Should additional cleaning services be required after use of the room, the organization agrees to reimburse Community Southern Bank for any and all such services.
5. Should any damage and/or repairs be needed as a result of the use of the room, the organization agrees to reimburse Community Southern Bank for any and all such damages or repairs.
6. Organizations should make arrangements 24 hours in advance if reserved dates and/or times need to be cancelled and/or changed.
7. The designated security officer must turn in an attendance sign-in sheet(s) and key either to the receptionist or dropped in the night depository box immediately after use of the room. Organizations will not be allowed use of the room again until these items are turned in.
8. For the convenience of our customers, parking during Bank hours of operation for the Community Room is designated to the back parking lot behind the building.
9. Due to usage of the night depository box, at no time should anyone park in any of the drive-thru lanes.
10. Community Southern Bank will attempt to have an ample supply of the following items for your use: coffee, tea, ice, sugar, sweetener, cream, cups, napkins and paper towels.
11. There is no smoking allowed in the Community Room or in any other area of the Bank.
12. No pets are allowed.

Our organization, _____, has received a copy of Community Southern Bank's Community Room "Rules for Use" and agrees to accept and abide by these rules.

We agree to clean and return the room to the condition in which it was found. We also agree to vacate the room in a timely manner so that others using the room are not inconvenienced.

We agree to reimburse Community Southern Bank for any damage and/or repairs that may be needed as a result of our organization's use of the room.

We agree to hold Community Southern Bank, its officers, directors and/or employees harmless of any accidents and/or injuries that may occur to any individual(s) during our organization's use of the room. We also agree to hold Community Southern Bank, its officers, directors and/or employees harmless of any damage and/or loss of property that may occur during our organization's use of the room.

_____	_____
Security Officer	Date
_____	_____
Alternate Security Officer	Date
_____	_____
Bank Officer	Date

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(This form to be turned in with key after use)

In accordance with the original application, our organization utilized Community Southern Bank's Community room on the following date and time. We represent the following individuals were in attendance on this date during its use. By signing this sheet, I agree to hold Community Southern Bank, its officers, directors, and employees harmless from any and all liability in consideration of my use of the Community Southern Bank's Community Room. (Use additional sheets if necessary)

Sign-In Sheet

Name of Organization: _____
Date of Meeting: _____
Start Time: _____ ***End Time:***_____
Number of Individuals in Attendance: _____

	Name	***Email Address***
1.		
2.		
3.		
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39. _____
40. _____
41. _____
42. _____
43. _____
44. _____
45. _____
46. _____
47. _____
48. _____
49. _____

_____ _____

Security or Alternate Officer Signature ***Organization Name***

_____

Date

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Parking Limitations

Community Southern Bank has received numerous complaints from customers regarding parking during Community Room events. Please instruct attendees to park on the side and rear of the building.

By signing below you accept the responsibility of instructing attendee to park in the designated places and understand you will be contacted if a parking problem is noted.

Accepted:

_____
Signature

_____
Cell Phone Number

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Your comments and/or suggestions are very important to Community Southern Bank. Please note any problem(s) you may have experienced while using our Community Room. We welcome any remarks you may have!

Remarks:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____

Signature Date