

## **Makerspace Room Agreement**

The library reserves the right to change or revise the terms of this agreement.

Patron information and signature are required.

I have read the policy and have no questions. I have accepted its terms and conditions.

Signature				Date	
Printed Name					
Address					
City/ State/ Zip					
Phone Number					
Email Address					
Library Card Number			State/ Photo ID		
USERS UNDER 18					
Any user under eighteen must have a parent or legal guardian sign this Makerspace Agreement.					
I, (PRINT NAME), acknowledge that I am the parent or legal					
guardian. I have read the Makerspace Policy and have no questions about it. By signing my name, I have voluntarily consented to and accepted the terms of the Makerspace.					
Parent/Legal Guardian Sign	ature				
Print Name					
Date					
Approved by Board of Trustees on April 23, 2025					

CONTACT US WWW.LCPL.ORG

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