

Customer Agreement Form

I, _____, (please print) understand that in using the Creation Spaces at Vaughan Public Libraries (VPL), I will be held fully responsible for the usage of the space and equipment for myself and/or my child.

- I will adhere to all VPL policies and procedures including: Operational Policy, Code of Conduct, Copyright Policy, and Internet Policy.
- I understand the inherent risks associated with the use of tools, equipment, devices and hazardous materials that may be used within the Creation Spaces.
- I agree to assume and accept all risks arising out of, or associated with, my use of the Creation Spaces.
- I understand that I am responsible for the full replacement or repair cost as determined by the library from activities causing damage to equipment, systems, software or computers.
- I understand that I am responsible for saving any work I wish to preserve to my own external device. Any work saved on library equipment will be deleted.
- I understand that VPL is not responsible for loss of data/information or damage to personal devices.
- I understand that the Creation Spaces may be used for lawful purposes only and will not be used to create material that is:
 - Prohibited by local, provincial or federal law.
 - Unsafe, harmful, dangerous or poses an immediate threat to the well-being of others.
 - Obscene or otherwise inappropriate for the Library environment.
 - In violation of another's intellectual property rights. The equipment must not be used to reproduce material that is subject to copyright, patent or trademark protection.
- I understand that the Library reserves the right to refuse any 3D print or carving request.
- I understand that the Library will not adjust any files for 3D printing or carving.

Initial: _____	Date: _____
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Fees

- I understand that I am responsible for the following fees:
 - 3D Printing: \$0.25/gram
 - Carving: \$2.00 per hour plus cost of material
 - Button Maker: \$0.25 per button
 - Other Fees: As per Operational Policy
 - Vinyl Cutter: \$1.00 per ½ foot

Initial: _____	Date: _____
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Personal information on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act, 1990, MFIPPA\Regulation 29. Personal information on these forms is collected in order to process the request after which the forms are destroyed. Non-identifying statistical information is retained. Questions regarding the collection of this information should be directed to the Director of Service Delivery. Freedom of Information Requests should be mailed to: Vaughan Public Libraries Administration Offices 2191 Major Mackenzie Drive, Vaughan, Ontario L6A 4W2

Booking Procedures

- I understand that a valid VPL Library Card number must be used at the time of booking and presented upon arrival for the booking.
- I understand that each booking is limited to a maximum of 2 hours per day (with the exception of 1 hour bookings for the Oculus Rift), which may only be renewed in the absence of a following reservation. An extended booking must be forfeited upon arrival of the next booking.
- I understand that children under 16 must be accompanied by an adult in the Green Room and Recording Studio.
- I understand that the maximum 3D printing time is 7 hours.
- I understand that the maximum carving time is 90 minutes.
- I understand that only designated library staff have access to the 3D printers and Carvey machine.
- I understand that all users of the Oculus Rift must be 13 and older and must read and adhere to all Health & Safety Rules and Guidelines.
- I understand that covered beverages are allowed, and food is not permitted.

Initial: _____	Date: _____
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- I agree to have my work featured on Vaughan Public Library's social media outlets.
- I have read and understand the information noted above and by signing below I agree to these terms and conditions.**

Library Card Number: _____

Name (please print): _____

Signature: _____

Date: _____

- If under 18, a parent or legal guardian is required to sign.**

Parent/Guardian Name (please print): _____

Phone Number: _____

Parent Signature: _____