

Jacob Edwards Library

236 Main Street
Southbridge, MA 01550
508.764.5426
Fax: 508.764.5428

Date: _____
Home Phone: _____
E-mail address: _____

RELEASE AND INDEMNIFICATION AGREEMENT

I understand that in offering my works of art to be displayed in the Jacob Edwards Library, Southbridge, Massachusetts, that I release and discharge and agree to indemnify and hold harmless the Town of Southbridge, its officials, boards, commissions and employees from all loss, cost, damages and liabilities for injury or damages or theft occurring during installation or exhibition or removal from such works of art including the matting and the framing of such works of art.

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City: _____ State: _____ ZIP: _____

Exhibition Dates – From: _____ To: _____

Signature: _____

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Library Use Only

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Library Director: _____

Date Signed: _____