



Warner Library
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Tarrytown, NY 10591
914.631.7734

www.warnerlibrary.org

Warner Library Display Case Application

Display case exhibitors should return this form filled out to Reference Librarian Robert Mannion
rmannion@wlsmail.org.

Exhibitor's name: _____

Contact person, if group: _____

Address: _____

Email Address: _____

Telephone: _____ home: _____ cell: _____

Display Case Exhibit Information

Title: _____

Theme/Medium: _____

Month of Display: _____

Waiver of Insurance

I read and agree to the term of the Warner Library Display Case Policy.

I hereby do not hold Warner Library liable for any damages or theft to displayed items.

Signature of Artist/Exhibitor: _____

Date: _____

Signature of Display Case Coordinator: _____

