



Application for Use of Meeting Room / Program Room
Use of room limited to library hours of operation and to available times.

Date requested: _____ Day of week: _____ Time: _____ to _____

Organization: _____

Person applying: _____ Position in group: _____

Address: _____

Telephone: _____ (daytime) _____ (evening)

President of group (if applicable): _____

President's address: _____ Phone: _____

Type of meeting: _____ Activity: _____

Subject of Activity: _____

Any special requirements / special equipment necessary? _____

Expected attendance: _____ (21 maximum seating capacity, 15 – 20 is comfortable)

Will refreshments be served? _____ (group is responsible for cleanup)

The applicant agrees to return the library facilities to a clean and orderly condition at the end of the activity and to pay the cost of repair or replacement of any damage to the facility or equipment. The library will not be responsible for damage or loss of materials used or left in the building.

Date: _____ Signature of applicant: _____

For internal use only

Approved: _____ Notified: _____

Authorized signature: _____ Date: _____