

This application must be sign to the Library's Business Off			-	prior to re	quested dat	te of mee	eting room use,
Name of Requestor:			Name of Organization:				
Name of Event:			Will this event b	pe open to th	e public: Yes		No
Nonprofit: Yes/No	Other:						
Are you charging an admission fee	? Yes N	10					
Date Requested:	Т	ïme Sta	art:	Time End:			
Please note: Setup and teardown	are included in the ti	me req	uested.				
Purpose for room rental:							
Anticipated attendance numbers:		_ Numb	per of tables / cha	airs needed:			
Contact person information (This	nformation will be g	iven to	the general publ	lic if it is a pu	blic event):		
Name: Phone: Phone:							
Email:							
Equipment Request:							
Large coffee maker	Small Keurig		Podium	Presentati	on Easel	External	CD/DVD Drive
White Board	Screen/Projector _		Laptop Comput	er	Presenter w	ith Laser Po	ointer
Preferred Meeting Room:							
Meeting Room 1:	Meeting Room 2		Meetir	ng Room 3			
We will make every attempt to me	eet requests, howeve	r, the L	ibrary reserves tl	he right to a	ssign rooms.		
Signature of Requester			Date				
Signature of Approver			Date				

Office Use Only Payment Status: Pending Paid In Full N/A