



Multiple Event Meeting Room Application

City of San Leandro
Library Services Department
300 Estudillo Ave.
(510) 577-3968
(510) 577-3967 FAX

Contact Information

Organization: _____
Contact Person: _____
Home Address: _____
Street _____ City _____ Zip Code _____
Phone: (____) _____ Work Phone: (____) _____ Email: _____

Meeting Information

Type of Activity: _____ Estimated Attendance: _____

Day & Date	Time needed (please include set-up and clean-up times)	Event starts at	For Library Use Only: Room Assignment
1. _____	_____ to _____	_____	_____
2. _____	_____ To _____	_____	_____
3. _____	_____ to _____	_____	_____
4. _____	_____ to _____	_____	_____
5. _____	_____ to _____	_____	_____
6. _____	_____ to _____	_____	_____
7. _____	_____ to _____	_____	_____
8. _____	_____ to _____	_____	_____
9. _____	_____ to _____	_____	_____
10. _____	_____ to _____	_____	_____
11. _____	_____ to _____	_____	_____
12. _____	_____ to _____	_____	_____
13. _____	_____ to _____	_____	_____

Room Arrangement (check one) Number of Chairs: _____ Number of Tables: _____ _____ Registration Table
____ Auditorium Style (rows of chairs) ____ Banquet Style ____ Conference Table Style ____ Classroom Desk Style ____ Food or Beverage Table

Equipment

____ Projector, Movie ____ Mic, Hand held ____ Flip Chart w/o paper ____ TV/VCR
____ Projector, Overhead ____ Mic, Standing ____ Flip Chart with paper & pens ____ TV/DVD
____ Projector, Slide ____ Mic, Table Top ____ Wooden Easel ____ Screen
____ Projector, Power Point ____ Mic, Podium ____ Dry Erase with pens
____ Conference Phone ____ Mic, Lapel ____ Portable Podium

Reservation Agreement:

If Application is granted, I agree to comply strictly with the facility guidelines, to supervise care in use of all facilities and equipment, and make good any damage or loss of property arising from our occupancy of any portion of the building. **ALL PARKING RESTRICTIONS APPLY TO MEETING ROOM USERS – TWO HOUR TIME LIMIT ON SPACES IN OUR PARKING LOT.**

Please Note: All applications are tentative until permit is issued.

Applicant's Signature

Date

For Library Use Only

Facility Fee _____
Security Fee _____
Insurance _____
Equipment Rental _____
Damage Deposit _____
Maintenance _____
Total Due _____

User Eligibility:
Group A _____
Group B _____
Group C _____
Group D _____
Group E _____
Group F _____
Group G _____

Approved by: _____ Date: _____