Multiple Event Meeting Room Application

Contact Information

Organization: ____________________________
Contact Person: __________________________
Home Address: ____________________________
Street: __________________________________
City: __________________ Zip Code: ________
Phone: (_____)________ Work Phone: (_____)________ Email: ________________

Meeting Information

Type of Activity: __________________________

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<tr>
<th>Day &amp; Date</th>
<th>Time needed (please include set-up and clean-up times)</th>
<th>Event starts at</th>
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Room Arrangement (check one)

- Auditorium Style (rows of chairs)
- Banquet Style
- Conference Table Style
- Classroom Desk Style
- Food or Beverage Table

Number of Chairs: ________
Number of Tables: ________
Registration 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: ____________ User Eligibility:
Insurance: ____________ Group A: ____________ Group B: ____________
Equipment Rental: ____________ Group C: ____________ Group D: ____________
Damage Deposit: ____________ Group E: ____________ Group F: ____________
Maintenance: ____________ Group G: ____________
Total Due: ____________

Approved by: ____________________________ Date: ________________