



Three Rivers Public Library District
Application for Use of Meeting Room

Application must be signed by an adult and submitted before use of the room.

Date of request: _____ Day of the week: _____

Time: from _____ to _____

Name of organization: _____

Name of person filling out form for organization: _____

Position in group: () Officer _____ () Member

Address: _____

Phone number: _____ Home Work Cell (Circle one)

Activity/subject planned: _____

Attendance for statistical reporting: _____

Brief description of materials or literature to be distributed: _____

Will refreshments/food be served: () YES () NO

I have read the meeting room policy and agree to leave the room clean and orderly condition in which I found it. We agree to pay for the cost of repair or replacement for any damage to the facility or equipment not covered by the security deposit. The library is not responsible for damaged or loss of materials used or left in the building by the group or organization. By submitting the request, I am assuring the library that the above information is correct and that any advance publicity should in no way involve the library other than as a place of meeting. I realize violations of the rules will result in the cancellation of the meeting and possible repercussions in scheduling future use of the room by this group or individual.

Signature: _____ Date: _____

Library Use Only: Date: _____

() Approved () Not Approved Staff initials _____

Fee paid (non-TRL cardholder/commercial) _____ Staff initials _____

Special requirements: _____