



FOREST PARK
PUBLIC LIBRARY

Forest Park Public Library Meeting Room Use Application

Applicant Information:

Name _____ Library Card Number _____

Email Address _____ Phone Number _____

Name of Organization/Group _____

Indicate one of the following:

Forest Park not-for-profit or community group _____

Forest Park Governmental Organization _____

Forest Park Business holding a non-commercial meeting _____

1. Date and Time Requested _____

2. Meeting Room Requested: Austin Room _____ Community Room _____

3. Are you Serving Refreshments? YES ___: What type? _____ NO ___

If you are serving refreshments please initial here to indicate that you've read and agree to abide by the Forest Park Public Library's Food Policy _____

4. Number of people expected _____

5. Number of tables requested _____ Number of chairs requested _____

Note that the room will be set up in a standard table/chair configuration. The applicant is required to arrange the tables and chairs as necessary if a different arrangement is desired.

6. Additional equipment requested: Projector _____ Laptop _____ Podium (only available in Austin Room) _____

Equipment will be checked out to the library card of the applicant and the applicant will be fully responsible for their use and any damage incurred. Initial here _____

Consent:

I state the above information is true and correct. I state that I have received, understand, and agree to abide by the Forest Park Public Library Meeting Room Use Policy and Food Policy. _____

I understand that failure to comply with library policies and conduct rules may result in a loss of meeting space privileges. _____

Cardholder signature: _____ Date: _____

STAFF USE ONLY: Application received on _____ Received by _____

Approved _____ Not Approved: _____ Reason: _____

Patron notified on _____ by _____

Entered in Evanced on _____ by _____