

MEETING ROOM REQUEST FORM  
(Please print or type)

ROOM \_\_\_\_\_

Name of group: \_\_\_\_\_

Date of Meeting: \_\_\_\_\_

Meeting begins (Time): \_\_\_\_\_ Meeting ends (Time): \_\_\_\_\_

Size of group (approximate): \_\_\_\_\_

Purpose of the meeting: \_\_\_\_\_

Food served: Yes \_\_\_\_\_ No \_\_\_\_\_

Person responsible: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number: \_\_\_\_\_

The person who signs this request form is responsible for problems or costs resulting from the specified use.

I have received and read a copy of the Meeting Room Policy and agree to follow it.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

## RESPONSIBILITIES BEFORE LEAVING THE MEETING ROOM

1. Clean kitchen area and wipe down tables. Cleaning supplies will be provided.
2. Sweep floor.
3. Take home all garbage.
4. Turn off all lights and flush toilets.
5. Return room to original arrangement as shown on wall map.
6. Lock outside door when leaving.
7. Drop off key in the library book return located in the alley.

If any items are missing upon arrival or you have any problems, please contact the library staff immediately.

Thank you.