

WINSLOW PUBLIC LIBRARY MEETING ROOM APPLICATION FOR USE

Name of Organization _____

Contact Person _____

Address _____

Telephone: Day _____ Evening _____ Cell _____

E-mail _____

Date needed: _____ Time from _____ to _____

Room requested: Meeting Room _____ Josiah Hayden Room _____ Both _____

Number of people expected: _____

I have read the meeting room policy and assume responsibility for compliance with the rules.

(You must confirm availability of room **by phone** before submitting form.)

Signature _____

Date _____

~~~~~ *Staff Use Only* ~~~~~

Application approved \_\_\_\_\_

Date \_\_\_\_\_