



## AVERY-MITCHELL-YANCEY REGIONAL LIBRARY SYSTEM MEETING ROOM RESERVATION FORM

Library: \_\_\_\_\_

Library Staff Member Booking Request \_\_\_\_\_

Booking Request made: at Library \_\_\_\_\_ by phone \_\_\_\_\_ by email \_\_\_\_\_ Date Made \_\_\_\_\_

Name of Group/Organization \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name of President/Chairperson \_\_\_\_\_

Purpose of Meeting (Please describe in detail; attach agenda if available. If having a speaker, please give subject of speech) \_\_\_\_\_

Meeting Date Requested \_\_\_\_\_ Time period \_\_\_\_\_ to \_\_\_\_\_

Anticipated Attendance \_\_\_\_\_ Will literature or press releases be distributed? \_\_\_\_\_ If yes, please attach a copy.

Will refreshments be served? \_\_\_\_\_ If yes, what type of refreshments? \_\_\_\_\_

**The following must be signed to confirm use of community meeting room:**

I, the undersigned, being eighteen years of age or older, have read the meeting room policy and regulations and agree to comply therewith. I agree to be responsible to the Public Library for the use and care of library property and facilities. As the undersigned, I understand my responsibilities include:

- 1) Paying for any damages to library property occurring during or in connection with the meeting;
- 2) Enforcing the meeting room regulations;
- 3) Cleaning up the room & leaving room in order at conclusion of the meeting;
- 4) Informing a library staff member that the meeting has ended;
- 5) Notifying the Librarian of number in attendance at meeting;
- 6) Returning a meeting room key (as specified by Librarian).

\_\_\_\_\_/\_\_\_\_\_  
**Applicant's Signature** **Date**

DATE BOOKING APPROVED \_\_\_\_\_ / DATE BOOKING DENIED \_\_\_\_\_

BY \_\_\_\_\_ / BY \_\_\_\_\_