Jeudevine Memorial Library Meeting Room Application Form

We welcome you and your group to the Jeudevine Memorial Library. Please complete this application form, sign it, and return it.

Name of organization:				
Type of organization: Non-Profit	Commercial	Private Group	Individual	
Contact Person:			(Legally Responsible)	
Mailing Address:				
Physical Address:				
Telephone Number:				
E-mail address:				
Request Date:				
Beginning Time:	F	Ending Time:		
Small conference room available	during regular librar	y hours. Parker Lado	l is available 7 AM–10 PM.	
Please indicate which room you	u require:			
Small Conference Room	Parker Ladd Cor	mmunity Room	_	
Equipment Needed: If you need them by library staff.	l the projector and scr	reen, please schedule	e an appointment to be shown how to u	se
Commercial organization fee is \$	350/use. Check here w	when paid		
Code given if needed (date)	C	ode:		
Good for the duration of your pro	ogram. You are respon	nsible for unlocking	and locking the door for your program	
excessive cleaning resulting fron	n using the meeting ro	oom, up to \$150. An	arge for any breakage, damage, or y costs for damage to furniture/fixtures tricted use of meeting spaces in the futner.	
the Jeudevine Memorial Libra or other promotional endeavor sh Promotional materials must cle this may result in losing access to release or social media posts using	ry Board of Trustees nould state or imply the early state that the lift of this space. The onlying this language: "Th	s or staff. Furthermone library's endorsen brary is merely the mention of the libra is event will be held	rsement of the event or its sponsor by the presence of the event or its sponsor. I location of the meeting. Failure to do any should appear at the end of your present in the Parker Ladd Community Rollis not a library-sponsored event."	er,
I certify that I have read and a	gree to abide by the	terms outlined in tl	nis application.	
Signature:	Date:			