

Meeting Room Use Application Form

The Meeting Room Operating Policy must be read prior to using the Paul Pratt Memorial Library meeting rooms.

Applicant Name: _____
(Print)

Organization Name: _____

Address: _____

Telephone: _____

Date(s) requested: _____ Time of Day requested: _____

Purpose of Meeting: _____

Estimated Number of People Attending: _____

I have read the Meeting Room Operating Policy and agree to abide by the rules and regulations for use.

(Signature of Applicant)

(Date)

Approval granted by (staff member): _____

Date: _____