

**RIDLEY TOWNSHIP PUBLIC LIBRARY & RESOURCE CENTER
MEETING ROOM APPLICATION**

NAME OF ORGANIZATION: _____

PURPOSE OF MEETING: _____

DATE(S) REQUESTED -- INCLUDE FIRST PREFERENCE AND ALTERNATE DATE

1ST CHOICE: _____

2ND CHOICE: _____

IF THIS REQUEST IS FOR A REGULARLY SCHEDULED MEETING, PLEASE LIST EXACT DATES OF EACH MEETING FOR THE YEAR THIS REQUEST COVERS.

DATES: _____ TIME: _____

ANTICIPATED ATTENDANCE: _____

MAXIMUM OCCUPANCY IS 60 FOR THE LARGE MEETING ROOM

REFRESHMENTS **CIRCLE ONE:** YES NO

DONATION \$50 **CIRCLE ONE:** CASH CHECK/MO

ARRANGEMENTS MADE BY:

NAME: _____

ADDRESS: _____

TELEPHONE: _____

EMAIL: _____

*THE POLICY FOR THE USE OF THE MEETING ROOM IS AVAILABLE ON THE LIBRARY WEBSITE.
VIOLATION OF THESE REGULATIONS WILL RESULT IN THE CANCELLATION OF FUTURE MEETINGS.*

I HAVE READ THE MEETING ROOM POLICIES AND ACCEPT THEIR PROVISIONS.

DATE OF REQUEST

SIGNATURE OF RESPONSIBLE PARTY

DATE OF APPROVAL

APPROVED