Application for Use of Meeting Room

Date of Meeting	Date of Application	
Beginning time:	Ending time:	
Name of organization:		
Purpose of meeting:		
Application made by:		
Address:	Telephone:	
Special requirements:		
Refreshments (please detail)	:	
Number of chairs needed	Tables	
Special needs required:		
Other things the Library Boa	ard should know:	
educational and culture. These meetings or promay be granted by the stated before hand or perfect hand in the stated before hand or stated hand sta	hay be used only with pre-approved permission from the library representative and this application. be served without prior approval. mitted. oducts (paper plates, napkins, garbage bags) will be replaced or reimbursement happens, and is felt by the Library Board to be other than accidental, will be the above named organization to rectify. time that is not during library open hours, the building must be locked after use. blocked, any damage that occurs to the library building will be the responsibility	d If of
-	oms of the Spring Green Community Library.	. UI
Application Approved	Application Denied	
I have read and agree to abid	le by the above.	

Applicant

Library Representative