HARRISON PUBLIC LIBRARY

APPLICATION FOR THE USE OF THE ERIC R. SMITH COMMUNITY ROOM

This completed application must be filed with the Community Room Coordinator. All applications are subject to approval by the Library Board of Trustees. A copy of this application, signed by the Library Director, will be returned to the authorized representative of the program sponsor as notification of approval or denial.

1. Name of program sponsor: ____________________________________________
   Check here if not-for-profit: _____        Check here if for-profit: _____

2. Authorized representative of program sponsor (name, address, home phone, cell):
   ______________________________________

3. Is this program or event open to the public? Yes: _____        No: _____

4. Please describe the proposed program or event. Continue on back if necessary.
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

5. Equipment requested (check all that apply; indicate quantities of chairs and tables):
   Chairs (95 available): _______  Television: _____
   Tables, 30" x 60" (4 available): _____  VCR: _______
   Tables, 30" x 72" (2 available): _____  DVD player: __________
   Microphone: ________________  Slide projector: __________
   Lectern: ______________________  Digital projector: _______

6. Name and telephone number of person who will operate the above equipment:
   ___________________________________________________________________

7. Requested date, time, and duration of program: ____________________________

8. Size of group expected: Adults _____        Children _____

The undersigned is an authorized representative of the program sponsor at least 21 years old and has read and accepts responsibility for compliance with the Policies for the Use of the Eric R. Smith Community Room.

Signature and date: ____________________________________________________

For library use only        Approved: _____        Denied: _____        Fee: _____

Signature of Library Director and date: _________________________________