

APPLICATION FOR USE OF MEETING ROOM FACILITIES HOMEWOOD PUBLIC LIBRARY

DATE(S) AND HOURS REQUESTED:

For each date requested give day, date, beginning time and ending time. **Include time for room set-up and breakdown.**

Single Meeting Date:

Date(s): _____

Hours: From _____

Repeating Meeting Date:

Day of Week: _____ Week of Month: _____
Starting Date(s): _____

To _____

Consecutive reservations may be made for Lower Level Meeting Room Facilities only.

If your meeting falls on a day the Library is **CLOSED**, the Library will assume you will not meet unless you submit an alternate meeting time.

INFORMATION ABOUT THE PERSON OR GROUP HOLDING THE MEETING:

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

PURPOSE OF THIS MEETING: (Please check the appropriate box)

Commercial – A meeting is considered commercial if:

- (i) any charges or fees are required in order to attend the meeting.
- (ii) goods or services are sold at or offered for sale at the meeting.
- (iii) the meeting promotes a commercial enterprise.

Social Event – Parties, receptions, ceremonies. Nothing may be attached to the walls, doors, furniture, or ceiling tiles. **Fire Code prohibits any open flames, such things as incense or candles.**

Non-Commercial – The meeting is neither a Commercial Meeting nor a Social Event.

_____ Expected Attendance

Yes No -- Is meeting open to the general public?

Yes No -- Will you serve refreshments?

Yes No -- Catered Meal?

Yes No -- Will you serve alcoholic beverages? (Alcohol may **not** be served when the library is open.)

Two Homewood Police Officers will be required if alcohol is to be served.

SET UP OF ROOM (Please check the appropriate box)

Auditoriums and meeting rooms will be set up **AUDITORIUM STYLE**. Any request for a set up other than auditorium style must be made at the time the reservation is made or at least one week in advance. Special set up can only be done by library personnel and will require an **ADDITIONAL FEE**.

Yes No -- Special Set Up? If yes, please fill out the Room Set-Up Form.

I understand that it is my responsibility to check my audio visual equipment before the requested date to make sure that it is compatible with the library's systems.

By signing below, I certify that the information on this application is true and correct.

Signature

Date

**YOU MUST PRINT & SUBMIT USER AGREEMENT
CONTRACT ALONG WITH THIS APPLICATION**