

EATON PUBLIC LIBRARY ROOM REQUEST FORM

Thank you for choosing the Eaton Public Library to host your meeting or event. Please review the attached Meeting Room Policy before signing this document.

It is imperative for your meeting or event to run smoothly that you fill out this form completely and legibly. Thank you for doing so.

Please note that your group is responsible for their own room set-up and breakdown. The time for this should be included in the time you request to use the room. THE LIBRARY DOES NOT PROVIDE FACILITIES SERVICES for room usage.

- ❖ Library events take precedence over all other events scheduled regardless of date scheduled.
- ❖ Events may be scheduled for up to three (3) months at a time. A new form will be required for each three (3) month time.
- ❖ Events beginning or ending after hours will require additional approval by the Library Director.

Please print or type

Name of Responsible Party _____ Title: _____

Organization's Name: _____

Organization's Address: _____

Organizations Phone Number: _____

Organization's Contact E-Mail: _____

You will receive an email confirmation regarding your reservation

Please Specify: Government Agency Not for Profit For Profit ** Other
** a donation of 15% of sales/profits is encouraged to Friend's Of The Library

Nature of the Meeting: _____

Meeting Date: _____ Start Time: _____ End Time: _____

Room Requested: Study Room 1 Study Room 2 Colorado Room
 Rebecca Eaton Conference Room (total room capacity 19 people)
 Edith Coffman Conference Room (total room capacity 19 people)
 Event Room (total room capacity 227 people)

Est. Number of Attendees: _____

Number of Chairs Needed _____ Number of Tables Needed: _____

TECHNOLOGY NEEDS:

- Yes, we will need technology (select items below) No, we will not need technology or support
- We will need technology support from library staff We will provide our own technology

Technology Needed: (check all that apply)

- | | | |
|-----------------------------------------|-----------------------------------------------|-------------------------------------|
| <input type="checkbox"/> Blu-Ray Player | <input type="checkbox"/> Extension Cords | <input type="checkbox"/> Headphones |
| <input type="checkbox"/> HDMI Cable | <input type="checkbox"/> Internet Access | <input type="checkbox"/> Laptop |
| <input type="checkbox"/> Microphone | <input type="checkbox"/> Mobile TV w/computer | <input type="checkbox"/> Mouse & |
| <input type="checkbox"/> Projector | | Keyboard |

KITCHEN NEEDS:

Yes, we will use the kitchen No, we will not use the kitchen

Kitchen Needs: (check all that apply)

- Keurig Machine Microwave Refrigerator/Freezer
- Stove

Liability for Use of Facility: In consideration of the Eaton Public Library lending the above specified room(s) to the undersigned on the date and time specified, the undersigned hereby expressly agrees to indemnify and hold Eaton Public Library harmless from all claims, actions, suits, proceedings, costs, expenses, damages, and liabilities, including attorney’s fees arising out of, or resulting from occupancy or use of the aforementioned premises by the borrower.

I have read the policies and guidelines for the use of the Meeting Room(s) and agree that my group will follow the rules set forth. I understand that if a Library event conflicts with my event, the Library event will take precedence.

Signature

Date signed

Special requests or considerations *(please type or print)*:

STAFF USE ONLY

Approved by: _____ Date: _____

Date Booked: _____ Entered by: _____ Room: _____

Modifications or restrictions if any: _____

After Hours:

Disapproved by: _____ Date: _____

Reason: _____