

# Farmington Public Library Meeting Room Application Form

Date of meeting: \_\_\_\_\_ Time of meeting: \_\_\_\_\_ to \_\_\_\_\_

Name of group/organization: \_\_\_\_\_

Is this group/organization a non-profit? ☐ Yes ☐ No

Purpose or function of the organization (please be specific):  
\_\_\_\_\_  
\_\_\_\_\_

Room being applied for: \_\_\_\_\_ # attending: \_\_\_\_\_

Name of responsible party (please print): \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Will refreshments be served? ☐ Yes ☐ No

Will library equipment be needed? (use is subject to approval ☐ Yes ☐ No

☐ projector ☐ microphone ☐ other (please specify) \_\_\_\_\_

*Check here to indicate that you have read and agree to the Farmington Public Library Meeting Room Policy located at <http://farmington-mo.gov/library/meeting-rooms/>. I understand that completing this form does not guarantee the use of a meeting room for the requested date and time.*

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

For Sarah Barton Murphy Community Room applicants only:  
Please indicate how you would like the room set up:

☐ tables and chairs (seats 48) ☐ chairs only (seats 100) ☐ other (please explain below)

Application approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Deposit/Rental Fee paid ☐ Amount paid: \_\_\_\_\_