

Farmington Public Library Meeting Room Application Form

Date of meeting _____ Time: From _____ to _____

Name of group/organization _____

Is this group/organization a non-profit? YES NO

Room being applied for _____ Expected attendance _____

Name of responsible party (please print) _____

Address _____ Phone # _____

Email address _____

Purpose or function of the organization (Please be specific)

Will refreshments be served? YES NO

Will library equipment will be needed? YES NO

If yes, please list _____

In making application for the use of a meeting room, I have been given a copy of the provisions for room use, have read and understand them, and hereby agree to comply.

Signature of applicant _____

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 _____

Application approved by _____ Date _____

Deposit/Rental Fee paid Amount paid _____