

AUBURN PUBLIC LIBRARY - MEETING ROOM APPLICATION

Organization _____

Organization
Address _____

Is the organization a non-profit? Yes No

Name of
Applicant _____

Daytime phone _____ Email _____

Meeting Room Requested:

Androscoggin Community Room (up to 140 people)

Please indicate room set-up style:

____ **Auditorium Style** – Up to 100 chairs facing front

____ **Café Style** – Up to 10 tables with up to 6 chairs grouped around each

____ **Roundtable Style** -- Six to eight tables ganged together, chairs around the outside

____ **Classroom Style** – Tables in rows with chairs behind them, facing front

Conference Room (up to 25 people)

Set-up style: Roundtable

Number of people expected to attend: _____

Event date: _____ Event start and end time: _____

Additional Set-up time: _____

****PLEASE BE SURE TO NOTE SET UP TIMES ABOVE. ROOM RESERVATIONS WILL BE NOT BE AVAILABLE ANY EARLIER THAN THE TIMES LISTED HERE.**

Purpose of the meeting:

Is the meeting open to the public? Yes _____ No _____

Equipment and any additional set up needed (see Meeting Room Information Sheet):

I have read the enclosed Auburn Public Library Meeting Room Policy and agree that my organization will abide by these rules and regulations. I will be responsible to secure any applicable copy or performance rights. I further agree that my organization will be responsible for any damages to Library property or persons which may occur as a result of my organization's use. I certify that I am authorized to make these representations on behalf of my organization and will be responsible for any copyright and performance fees.

Signature _____ Date _____

Please return this completed form not less than 5 days before your planned use of the room.