

## APPLICATION FOR USE OF THE LAUREL PUBLIC LIBRARY COMMUNITY ROOM

The Laurel Public Library is pleased to provide a room for community use. Applications must be approved by the Library, the community room reserved, and required fees paid *before* using the room. Reservations may be made up to two months in advance of the event and no later than two weeks prior to the event. Return completed form to Laurel Public Library 720 W 3<sup>rd</sup> St. PO Box 68 Laurel, Mt. 59044.

*I have read the Library Use Rules and the Rules for Use of the Laurel Public Library Community Room and agree to abide by those rules and understand that I am responsible for any fees, loss of or damage to the facility and or equipment. I will be present during use of the room.*

SIGNATURE REQUIRED \_\_\_\_\_ Date: \_\_\_\_\_  
(Person Responsible)

NAME OF ORGANIZATION: \_\_\_\_\_  
Street address (required): \_\_\_\_\_  
PO Box: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Purpose and description of the meeting or event you plan to hold:

\_\_\_\_\_

Date of event \_\_\_\_\_ Time starting \_\_\_\_\_ Time ending \_\_\_\_\_

PERSON RESPONSIBLE: \_\_\_\_\_  
Your position with the organization: \_\_\_\_\_  
Home Address (required): \_\_\_\_\_  
Home Mailing Address (if different): \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Deposit enclosed : \$ \_\_\_\_\_ Hourly Fee: \_\_\_\_\_ hours at \$3.00 per hour = \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

For Office Use Only

Organization approved to use the LPL Community Room? \_\_\_\_\_ Yes \_\_\_\_\_ No

Fee waived and why \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_