

MEETING ROOM RESERVATION REQUEST

Monterey County Free Libraries

Submit to desired library branch at least 3 working days prior to meeting.

Name of Organization

Telephone

Mailing Address of Organization

Email Address

Purpose of the Meeting

Name of Applicant/Representative of Organization

MCFL card number

Address, Telephone, & Email of Applicant if different from Organization

Date(s) and Branch Library meeting room requested

I have read and will adhere to the policies and procedures established in the "Meeting Room Policy", a copy of which I have received. I am an adult, 18 years of age or older, and will be the responsible party on behalf of the organization requesting use of the meeting room. I will be present during the entire meeting(s) and will be responsible for the orderly conduct of the group and for any damage to library property or equipment.

Signature of Applicant/Representative of Organization

Today's Date

Office Held in Organization

THIS SPACE IS FOR LIBRARY USE ONLY

Fee received by: _____

Date: _____

Fee paid: _____

Amount _____

Approved:

Not approved:

Number of meetings _____

Reason: _____

Date: _____

Signature: _____
