

# Stillwater Public Library

## Meeting Rooms Application \*

### Meeting Information:

Title of Meeting (to be placed on the board) \_\_\_\_\_

Today's Date \_\_\_\_\_ Room Reservation Date: \_\_\_\_\_ Time of Reservation \_\_\_\_\_ - \_\_\_\_\_

Approximate size of group: \_\_\_\_\_ Is this a "non-profit group or organization"? Yes  No

**\*Please note ~ an application and \$50.00 deposit are required before your meeting will be scheduled and confirmed.**

### Which room do you wish to reserve?

<b>138</b> ~ for non-profit groups only Boardroom style (capacity 14) <input type="checkbox"/>	<b>214</b> U Shape style (capacity 40) <input type="checkbox"/>
<b>119</b> Classroom style (capacity 67) <input type="checkbox"/>	<b>202</b> Classroom style (capacity 36) <input type="checkbox"/>
<b>1st Floor Computer Lab</b> Classroom style (capacity 67) <input type="checkbox"/>	<b>313</b> Boardroom style (capacity 40) <input type="checkbox"/>
<b>215 Auditorium</b> Classroom style (capacity 108) <input type="checkbox"/> Theater style (capacity 250) Custom style (capacity varies)	<b>309 Reception Area</b> Classroom style (capacity 36) <input type="checkbox"/> Theater style (capacity 85) Round Table style (capacity 48)

### Applicant/Organization information:

Organization Name (if applicable): \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State/Zip)

Phone: (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Home) \_\_\_\_\_

(Fax) \_\_\_\_\_ Email: \_\_\_\_\_

Purpose or function of meeting: \_\_\_\_\_

I affirm that I am at least eighteen years of age. I have completely read and fully understand the policies, rules and the disclaimer pertaining to the use of the Stillwater Public Library's meeting rooms.

I agree to be responsible for my group and paying all fees accrued.

Name of applicant (please print): \_\_\_\_\_

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

### **For office use only:**

Deposit Amount: \_\_\_\_\_ Payment Description: \_\_\_\_\_ Date: \_\_\_\_\_ GIS \_\_\_\_\_

Transfer/Applied Amount \_\_\_\_\_ Refund Amount \_\_\_\_\_ Date: \_\_\_\_\_