

**Ventress Memorial Library  
Room Reservation  
Request Form**

Name of Organization \_\_\_\_\_

Date of requested meeting \_\_\_\_\_

Meeting Begins \_\_\_\_\_ Meeting Ends \_\_\_\_\_ AM or PM?

Contact Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_

Room Requested:

\_\_\_\_ Program Room/Kitchen (120 maximum occupancy)

\_\_\_\_ Conference Room (12 maximum occupancy)

\_\_\_\_ Quiet Study 1 (2 – 4 occupancy)

\_\_\_\_ Quiet Study 2 (2 – 4 occupancy)

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Signed \_\_\_\_\_

By signing this application, I bind my organization to observe the “Library Meeting Room Policy and Regulations”

- The room must be left in good order & according to diagram
- All tables & chairs must be put away
- All trash must be placed in bins in the kitchen
- All meetings must end 15 minutes prior to closing

Please direct any questions to the Library Director

Revised 5/17/2017