

HARWINTON PUBLIC LIBRARY

Conference Room Agreement

The capacity of the Conference Room is 12.

PURPOSE OF MEETING _____

NAME OF ORGANIZATION _____

ADDRESS _____

PHONE _____

CONTACT PERSON _____

DAY & DATE OF MEETING _____

TIME: FROM _____ TO _____

(EX: MON 12/11/18)

DAY & DATE OF MEETING _____

TIME: FROM _____ TO _____

DAY & DATE OF MEETING _____

TIME: FROM _____ TO _____

SIZE OF GROUP _____

LIBRARIAN'S SIGNATURE _____

DATE _____

The undersigned, on behalf of the above organization, has read and agrees to comply with the policy and procedures governing public use of the Library's **Conference Room**. The applicant also accepts full liability for any damages to the facilities or equipment, and agrees to confine the organizations activities to the assigned room, and acknowledges that the Library will not be responsible for materials or equipment left in the building by users.

SIGNATURE _____

DATE _____