

## COMMUNITY ROOM APPLICATION

Applicant/Organization: \_\_\_\_\_

Program Description/Meeting: \_\_\_\_\_

### Reservation Details:

Date \_\_\_\_\_

Arrival Time \_\_\_\_\_ am/pm    Event Start Time \_\_\_\_\_ am/pm

Event End Time \_\_\_\_\_    Departure Time \_\_\_\_\_

Expected Attendance: # Adults \_\_\_\_ # Young Adults \_\_\_\_ # Children \_\_\_\_

### Authorized representative completing the application:

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail Address \_\_\_\_\_

### Please attach - Certificate of Insurance, 501(c)3 attach copy of Certificate

Do you require room set up/break down? (\$25 fee)

Yes                      No    Party responsible for set up, break down and cleanup.

- Boardroom
- U-Shape
- Classroom
- Theater
- Other (please attach)

Do you require use of the audio/visual system?

- Yes    Please contact Jenny Kolesar at 914.739.5654 ext 311 .
- No

**Agreement**

I hereby apply for use of meeting room space as specified above and agree to the policies, procedures, and regulations and requirements as set forth in The Community Room Policy, which are incorporated herein by reference, and a copy of which I acknowledge that I have received, read, and understand and expressly agree to.

**For the Applicant/Organization**

**For the Library**

-  
Signature

-  
Signature

-  
Print Name & Title

-  
Print Name & Title

-  
Date

-  
Date

-  
Fee \_\_\_\_\_ Received \_\_\_\_\_