

Meeting Room Application

Date Needed: _____

Time needed: From: _____ To: _____

ROOM OPTIONS:

Small Meeting Room	Maximum Capacity: 4	Large Meeting Room	Maximum Capacity: 50
Food/drinks are not allowed in the Small Meeting Room.		Food/drinks are allowed. Clean-up is your responsibility.	

ROOM REQUESTED:

Small Meeting Room		Large Meeting Room	
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APPLICANT INFORMATION:

Organization Name: _____

Contact: _____

Address: _____
Street City/State Zip Code

Phone: _____ Work: _____ Ext: _____

Email: _____

Organization Type: **Non-profit** _____ **Other:** _____

Nature of Meeting: _____ **Estimated Attendance:** _____

ROOM SET-UP

- Eight tables and up to 50 chairs are available. Child-size chairs may also be available.
- Meeting rooms are set up as-is. If you desire a specific configuration, please arrive before the scheduled time to arrange the room. Library staff are unable to assist with set-up.
- Library-owned electronic equipment (i.e., AV system, DVD player, microwave) is reserved for staff use only.

LIABILITY FOR MEETING ROOM USE

IN CONSIDERATION of the Franklin Park Public Library District's leasing to the undersigned the use of library equipment and that portion, room, area, or facility of Library buildings, as hereinafter described, for the term hereinafter set forth:

Small Meeting Room: _____ Large Meeting Room: _____

for: _____
Time and Date of Requested Occupancy

the undersigned (Lessee) hereby expressly agrees to indemnify and hold Franklin Park Public Library District harmless from all claims, actions, suits, proceedings costs, expenses, damages, and liabilities, including attorney's fees, arising out of, or resulting from the occupancy or use of the afore described premises by Lessee.

I have read the Meeting Room Policy and agree to follow the rules set forth.

Dated this: _____ day of _____, _____
Name of Organization

Signature: _____

RETURN THE COMPLETED FORM:

- **In-person:** drop it off at the Information Desk.
- **Scan and email:** meetingrooms@fppld.org
- **Fax:** 847-455-6299

STAFF USE ONLY:

Confirmed by: _____

Date: _____