Community Meeting Room & Outdoor Space Request Form

Scheduling requests must be made at least two (2) weeks in advance. Please fill out this form completely.

Please check: Community Ro	oom Use Outdoor Space Use	
Organization's Name		
Responsible Party's Name		
Address		
City/State/Zip		
Phone Number ()	E-Mail	
Date(s) of Meeting		
Time of Meeting	AM / PM Approxim	mate attendance
Use of AV Equipment: Ye	es / No (circle one) – Fill out the Au	udio-Visual Equipment Checklist.
Any film/video to be shown to		ilm/videoe disclosed to the Library so that copyright hich valid permission for a public showing i
Purpose of Meeting		
	scheduled until you receive confi	
Library space will not be u	e Community Meeting Room & Out used for commercial purposes. I am applying on behalf of is located wi	a resident of the Town of Saugerties
Responsible Party's Signat	ure	
Print Name		Date
BRARY USE ONLY		
ate Received:	Date Approved:	Staff Initials:

Approved by the Saugerties Public Library board on December 14, 2010 Review History: August 9, 2011; December 13, 2011 (WOH)

Review Cycle: 3 years