

## BROKEN BOW PUBLIC LIBRARY MEETING ROOM USE APPLICATION

**Application Date:** \_\_\_\_\_

**Organization Name and address:**

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**Type of Organization:** ☐ Non-profit ☐ Civic/Community Group ☐ Religious

☐ Informal gathering of people with a like-interest

☐ Government ☐ Educational ☐ For-profit ☐ Other: \_\_\_\_\_

**Purpose:**

☐ group meeting ☐ public program ☐ other \_\_\_\_\_

*Please describe the event:* \_\_\_\_\_

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**Date(s) Requested:** \_\_\_\_\_

**Time Meeting begins:** \_\_\_\_\_ **Time Meeting ends:** \_\_\_\_\_

**Expected number of attendees:** \_\_\_\_\_

**Special equipment needed:** ☐ smart television ☐ audio equipment ☐ DVD/blue-ray player

☐ podium ☐ laptop ☐ \_\_\_\_\_

I have read the Broken Bow Public Library Meeting Room Use Policy and will comply with its specifications. I am authorized by my organization to sign this agreement.

**SIGNED:** \_\_\_\_\_

**NAME (PRINT):** \_\_\_\_\_

**TITLE/POSITION:** \_\_\_\_\_

**PHONE/CELL:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**Driver's License #:** \_\_\_\_\_

☐ Permission is hereby granted to use the library's meeting room for the above stated time and purpose in accordance with the Broken Bow Public Library Meeting Room Use by Community Groups Policy.

☐ Permission to use the meeting room is denied because of the following reason(s):

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Special conditions or changes for use:

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**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Authorized library staff

*\*Applicant will be given a signed copy of this application.*

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Fees paid (if applicable)\_\_\_\_\_ Date paid:\_\_\_\_\_

Cash: \_\_\_\_\_

Check (account information and check #): \_\_\_\_\_

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