

North Brunswick Public Library
880 Hermann Rd
North Brunswick, NJ 08902

Phone: (732) 246-3545

Fax: (732) 246-1341

APPLICATION FOR MEETING ROOM USE

Date(s): _____

Hours: From: _____ To: _____

TITLE OF PROGRAM: _____

Description of Program: _____

Organization/School: _____

Contact Person: _____

Office Phone: _____ Home Phone: _____

Person Responsible: _____

Office Phone: _____ Home Phone: _____

Anticipated Audience: _____ No. of Adults: _____ No. of Children: _____

REQUIREMENTS

Speaker's Table(s): _____ Speaker's Chair(s): _____

Audience Seating Required: _____ Seating Arrangement: _____

Other Arrangements: _____

I have read the rules for the use of the meeting room and agree to them. Also, I assume responsibility for any damages or loss of library furnishings or equipment.

Signature

Date