

Lakeville Public Library

4 Precinct Street, Lakeville, MA 02347 Phone: 508-947-9028 Fax: 508-923-9934

APPLICATION FOR MEETING ROOM USE

- _____ Large Meeting Room (Contact: Library Director, Jayme Viveiros, 508-947-9028 option 4)
- _____ Local History Room (Contact: Library Director, Jayme Viveiros, 508-947-9028 option 4)
- _____ Children's Program Room (Contact: Youth Librarian, Teresa Mirra, 508-947-9028 option 3)

Name of Organization/Group _____ Date of Application _____

Meeting Purpose/Type _____
(Please note that all meetings must be open to the public and of a non-profit nature.)

(Circle one) This is a LIBRARY TOWN STATE LOCAL GROUP or INDIVIDUAL meeting.

Date of Meeting _____ Anticipated Attendance _____

This is a _____ One time use OR _____ On-going, (e.g. monthly,) meeting
(Please note that groups are encouraged not to use the meeting room more than once a month)

Dates for future use (e.g. "every second Tues.") _____

End date for on-going use _____
(If no end date is given, group will need to renew its application each December for the following calendar year.)

Meeting Hours: _____ AM PM to _____ AM PM
(Meetings must take place within regular library hours, and end 15 minutes prior to closing time.)

Refreshments will be served: ___ Yes or ___ No (Limited kitchenette facilities are available)

Person Responsible _____ Phone _____

Address _____

E-mail _____ Cell phone _____

Please respect our library patrons. Children must be supervised at all times. No literature may be disseminated outside the meeting room without permission of the Library Director and Trustees. If your meeting will have large attendance, attendees are requested to park in the Old Town Hall lot, adjacent to the library. Your group will be responsible for set-up, clean-up and/or provision of any supplies or special equipment. **ANY SPECIAL REQUESTS FOR ASSISTANCE OR EQUIPMENT MUST BE MADE AT LEAST ONE WEEK IN ADVANCE. THE LIBRARY IS NOT RESPONSIBLE FOR PROVIDING STAFF ASSISTANCE OR EQUIPMENT, AND MAY DO SO SOLELY AT THE DISCRETION OF THE LIBRARY DIRECTOR & TRUSTEES.**

I have read the above, and the attached "Meeting Room Policy" and agree to comply with all policies and regulations of the Lakeville Public Library.

Signature _____ Date _____

For Library Use Only:
Approved by Board of Trustees _____
Revised 12/2018