

EMMA S. CLARK MEMORIAL LIBRARY
120 MAIN STREET
SETAUKET, NEW YORK 11733

APPLICATION FOR USE OF MEETING ROOM FACILITIES

NOTE: Please read the regulations on the back of this form before filling out this application. Your signature attests to your group's eligibility and intent to comply with all regulations. The Library Director has the right to request additional information concerning the nature of the organization and the program before granting approval. The fact that an organization is permitted to meet in the Library does not in any way constitute an endorsement of the organization's policies or beliefs by the Library Board and staff.

ROOM REQUESTED: ___ BOARD ROOM (Capacity 10) ___ COMMUNITY ROOM (Capacity 79)

DATE(S): _____ HOURS: _____ to _____

ACTUAL MEETING STARTING TIME FOR ACTIVITIES CALENDAR: _____

ORGANIZATION OR GROUP NAME: _____

MAILING ADDRESS: _____

CONTACT DATA FOR WEB CALENDAR LISTING AND PUBLIC INQUIRIES:

NAME: _____ PHONE AND/OR E-MAIL: _____

NATURE OR PURPOSE OF THE PROGRAM: _____

ANTICIPATED ATTENDANCE: _____ (Community Room Capacity: 79 people)

ROOM ARRANGEMENT: Auditorium ___ Chairs Around Tables ___ Speaker's Table ___ Lectern ___

EQUIPMENT NEEDED: Audio Cassette Player ___ Video Cassette Player ___ DVD Player ___
CD Player ___ Digital Projector ___ Wired Microphone ___ Wireless Microphone ___

PLEASE NOTE: Anyone using AV equipment should request assistance at the Adult Reference Desk on the main level at least thirty minutes prior to their meeting. Earphones are available for the hearing impaired.

In consideration of the use of meeting room facilities, each group or organization agrees that it will pay for all damage to any property of the Emma S. Clark Memorial Library resulting directly or indirectly from the conduct of any member, officer, employee or agent of the organization or group, or any of its invitees and that it will save harmless and indemnify the Emma S. Clark Memorial Library from any and all liability which may be imposed upon the library for any injury to persons or property caused by the organization or any other person in connection with the program.

It is understood that the Emma S. Clark Memorial Library assumes no responsibility whatever for any property placed in the Library in connection with the program and that the Library is hereby expressly released and discharged from any and all liability for any loss, injury, or damage to persons or property which may be sustained during, or by reason of, a program held on the Library's premises.

I am a registered borrower at the EMMA S. CLARK LIBRARY, and I have read and agree to abide by the Regulations on the reverse side of this form.

SIGNATURE OF AUTHORIZED APPLICANT: _____

PRINT NAME HERE: _____ PHONE: _____

ADDRESS: _____
