

# MEETING ROOM APPLICATION

After completion, return by one of the following:

- FAX: 740-387-9768
- Email to [director@marionlibrary.org](mailto:director@marionlibrary.org)

I will email confirmation upon receipt of application.



445 East Church Street  
Marion, OH 43302  
740-383-9702

<b>ORGANIZATION</b>			
Description:			
Type of Organization:	<input type="checkbox"/> Civic	<input type="checkbox"/> Community	<input type="checkbox"/> Professional Association
	<input type="checkbox"/> School	<input type="checkbox"/> Faith-based	<input type="checkbox"/> Business
	<input type="checkbox"/> Government	<input type="checkbox"/> Social	<input type="checkbox"/> Other
<b>Address</b>			
<b>Phone</b>		<b>Email:</b>	
<b>Meeting Purpose</b>			
<b>Meeting Date</b>		<b>Meeting Time</b>	From: To:
<b>ROOMS</b>	<input type="checkbox"/> <b>SMALL</b> (10) 1 Table 10 Chairs	<input type="checkbox"/> <b>SMALL</b> (25) 2 Tables 25 Chairs	<input type="checkbox"/> <b>LARGE</b> (50) 8 Tables 50 Chairs
	<p>The meeting room application must be made by an adult, who:</p> <ul style="list-style-type: none"> <li>• will be present at the event,</li> <li>• will be responsible for the orderly conduct of the group,</li> <li>• will be held liable in the event of any damage to library property.</li> </ul> <p><b>NOTHING MAY BE AFFIXED OR MOUNTED IN ANY WAY TO THE WALLS.</b></p> <p><b>I have read the Meeting Room Use Policy and agree to all of the terms.</b></p>		
Printed Name		Date	
Signature		Title	

**NOTES:** MPL encourages groups using the meeting rooms to car pool when possible.

Reservation Taken by: \_\_\_\_\_