

Meeting Room Application expires one year from date of approval.

APPLICATION FOR USE OF THE HUBBARD LIBRARY MEETING ROOMS

Hubbard Public Library
436 West Liberty St.
Hubbard, Ohio 44425
330-534-3512
Email – Reference@beyond-books.org

(please print)

Name of Organization _____

Name of Individual making application _____

Position held in Organization _____

Address of Applicant _____

Patron ID Number _____

Phone Number _____ Email _____

The undersigned hereby states that he/she has received a written copy of the Meeting Room policy and hereby personally, and on behalf of the said organization, if any, assumes total and full responsibility for the use of said room(s) and the consequences thereof, including but not limited to any fees for damage to Library facilities and equipment and/or personal injuries related directly or indirectly to or incurred during use of said room(s). It is understood that the Hubbard Public Library, its employees, agents, or the Board of Trustees have no obligation or responsibility for personal damage, injury, loss or disappearance of property for any reason in connection with the use of the meeting room(s) or premises. It is further understood that the Hubbard Public Library does not provide private security service for users of the meeting room(s). Individuals or organizations using the meeting room(s) are responsible for providing security if needed.

I affirm that the above organization is a nonprofit civic, cultural, or educational community group meeting for a nonprofit purpose.

Date _____ Signature of Applicant _____

Application Approved: Yes _____ No _____ **Approval expires one year from date below.**

By: _____ Date: _____

RESERVATION REQUEST FOR USE OF THE HUBBARD LIBRARY MEETING ROOMS

Hubbard Public Library
436 West Liberty St.
Hubbard, Ohio 44425
Email – Reference@beyond-books.org

NAME OF GROUP APPLICATION ON FILE: _____

Contact Name: _____

Phone Number: _____ Email address: _____

Applications will remain on file for one (1) year from date of approval. Meeting rooms may be reserved using the Reservation form only for one year from the date of approval of a group's application.

Reservations for a regular meeting by the same group will be accepted no more than three (3) months in advance. Conditional reservations may be accepted farther in advance with the understanding that the needs of the library may result in rescheduling or cancelling the tentative booking.

A library related program may take precedence over other scheduled uses of the room. An attempt will be made to provide an alternative date or time for the group.

Reservations will be confirmed by telephone or email.

Failure to notify the library of cancellations or changes in scheduling of meeting rooms within 48 hours of scheduled use may result in suspension of meeting room privileges.

Date(s) Needed _____

Time Room is needed (including set-up):

If meeting is recurring, End Date _____

Refreshments will be served: YES _____ NO _____

Number Attending Meeting _____ Number of Chairs Needed _____

Number of Tables Needed _____ Other Equipment _____

Applicable Fees: _____

Date: _____ Amount Paid: _____

Booking confirmed by _____