



Policy Agreement Form

I have read and agree to abide by the library's policy for the use of the meeting room. I understand any meeting or activity will be immediately stopped at the discretion of the branch manager or director if any disruptive, dangerous, or illegal activity is observed. This includes, but is not limited to, smoking in the building or drinking alcoholic beverages. I agree to be the responsible party for the use of the meeting room and understand that I may be charged for any damages or cleaning charges resulting from my use of the meeting room.

Organization _____

Printed Name _____

Signature _____

Library Card Number _____ Date _____

Contact Phone Number _____

Contact e-Mail _____

Date of Event _____

Staff Use Only
Booking Fees _____