

# Great Barrington Libraries Meeting Room Use Application

Name of Group \_\_\_\_\_ Date of Application \_\_\_\_\_

Responsible party \_\_\_\_\_ Contact # \_\_\_\_\_

Type or Purpose of meeting \_\_\_\_\_

Date(s) of meeting \_\_\_\_\_

Number expected \_\_\_\_\_ Hours of meeting \_\_\_\_\_

Which meeting room is preferred? Community (75 standing; 50 seated) \_\_\_\_\_

Conference (20 standing; 14 seated) \_\_\_\_\_

How many tables \_\_\_\_\_, chairs \_\_\_\_\_ are needed?

Is a podium or other equipment needed? Please specify \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the pantry required? \_\_\_\_\_

I have read and agree to comply with the library policy.

\_\_\_\_\_ Signature