



Applicant returns this form

Logan County Libraries, Knowlton Library Goodrich Community Room Application

Organization or Title of Meeting: _____

Meeting Date: ____/____/____ Meeting Time: ____: ____ to ____: ____

The standard time allowed to set up and tear down is 30 minutes before and 30 minutes after your event.

If you require additional time, please state here: _____

Please Print:

Name and title of person responsible: _____

Address: _____

Phone number: _____ Email address: _____

Purpose of meeting: _____

Estimated attendance: _____ Will you be serving refreshments? Yes No

(max. room capacity is 125 people without chairs, 58 people with chairs and tables)

Will you be using latex balloons? Yes No

Please Check:

_____ Public Event _____ Post my event/name/contact info on the library's online calendar

_____ Private Event _____ DO **NOT** post my event on the library's online calendar

_____ My organization **IS** a non-profit organization under IRS Code 501(c)(3)

I request to use the following Library equipment:

_____ Smart TV _____ DVD Player _____ Laptops (3 available to check out at Information Desk)
with HDMI cables for connecting your device (staff will assist with setting up if needed)

*The library will accept **monetary donations** for the use of the Community Room for private individuals using the room for personal private events who do not fall under the IRS Code 501(c)(3).*

*There will be **no charge** for non-profit IRS Code 501(c)(3) organizations. A **\$75.00 usage fee** will be charged to for-profit organizations, companies, or individuals.*

The meeting room is provided as a community service by the Logan County Libraries. The library neither sponsors nor endorses events nor the presenting individual or organization.

I have read the policy and agree to abide by the Goodrich Community Room rules and regulations. The undersigned assumes all and exclusive responsibility for the preservation of the order and the sole and exclusive liability for any injury of persons, and damage to, or loss of property that may result from this use, and for the due observance of all regulations of the Board of Trustees of the Logan County Libraries and acknowledges receipt of the rules and regulations regarding the use of the Goodrich Community Room.

Signature: _____ Date: _____

Library Use Only

_____ Staff Initials _____ Approved/Denied _____ WhoFi