



Date: \_\_\_\_\_

MEETING ROOM APPLICATION

\_\_\_\_\_
Branch

Group Name: \_\_\_\_\_

Group Mailing Address:

Street City Zip

Group Representative: \_\_\_\_\_

Representative Mailing Address:

Street City Zip

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Alternate Representative: \_\_\_\_\_

Alternate Representative Mailing Address:

Street City Zip

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Nature or purpose of group: \_\_\_\_\_

Planned Activities: \_\_\_\_\_

Meeting date requested: \_\_\_\_\_ Alternate date: \_\_\_\_\_

Time of meeting (please allow for set-up): \_\_\_\_\_ Until: \_\_\_\_\_

Please note that meeting rooms are only available during open library hours.

Number Expected to Attend: \_\_\_\_\_

Equipment requested:

- [ ] Podium [ ] Microphone (Downtown only) [ ] Computer Projector [ ] Slide Projector [ ] Transparency Projector [ ] VCR/DVD

I agree to defend, indemnify and hold harmless the Spokane Public Library, its departments, employees, agents, officers and volunteers from any and all liability in any and all matters, including any meetings and special events, concerning the above named group or individual.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_