Meeting Room Contract

The purpose of this contract is to apply for permission to use a meeting room of the St. Charles Parish Library.

Primary Contact Person: _____

Library Card Number: 2 3 1 5 7 ____ ____ ____ ____ ____ ____ ____ ____ ____

Phone: _____ Email_____

Name of Organization: _____

Secondary Contact Person: _____

Phone: _____ Email_____

Meeting Room Location	
Number of Attendees	
Date of Meeting(s) If recurring see attached form.	
Start Time (include prep)	
End Time (include clean-up)	
Type of Activity	

This request is for a St. Charles Parish School Community Education class. ☐ YES ☐ NO
If yes, please complete a *Meeting Room Contract – Community Education Addendum*.

☐ I have received a copy of and read the Meeting Room Policy adopted by the Library Board of Control and, if granted permission to use the room, I agree to abide by the provisions of the policy and assume personal responsibility for any damages which may be caused to library facilities as a result of this meeting.

Signature: _____ Date: _____

For Staff Use Only:

Contract Year _____ Date Received:_____ Received by: _____

Application is: __ Approved __ Denied due to:_____

Meeting Room Contract Attachment

This attachment can be utilized to document recurring meeting dates in regards to the Meeting Room Contract.

Primary Contact Person: _____

Type of Activity: _____

List Recurring dates in table below:

Month	Dates

For Staff Use Only:

Contract Year _____ Date Received:_____ Received by: _____

Application is: __ Approved __ Denied due to:_____

Additional Information/Comments (examples: refreshment info, no-shows, etc.): _____

_____

_____