Weedsport Free Library

Meeting Room Application (Complete all sections below)

ORGANIZATION INFORMATION

Organization Name	
Organization Address	
Purpose of Organization	
APPLIC	ANT INFORMATION
Name & Title of Applicant	
Telephone Number	Best Time to Call
Cell Phone Number	
MEETI	ING INFORMATION
Date Requested	Day of week
Time: From	To
Purpose of Meeting	
Expected Attendance	May not exceed occupancy limit (29).
I have read and understand the "Rules for	r Meeting Room Use" and agree to abide by them.
Print Name	Organization
Signature	Date
Request Approved	Request Denied
Library Director's Signatu	are

Reviewed: 06/09/22