



NEW CITY LIBRARY

SERVING THE COMMUNITIES OF NEW CITY, CONGERS AND BARDONIA

APPLICATION FOR USE OF LIBRARY PUBLIC MEETING ROOMS

Application Date: _____
 Organization: _____
 Chief Officer/Title: _____
 Contact Person/Title: _____
 Address: _____

Daytime Phone: _____
 Evening Phone: _____
 E-Mail Address: _____
 Web Site: _____

Date Requested: _____
 Time Requested: _____ (including set-up and clean-up)

Room Requested (check one):
 Meeting Room (Maximum Capacity 80) # _____
 Conference Room (Maximum Capacity 18) # _____
 Storytime Room (Maximum Capacity 20) # _____
 Group Study Room (Maximum Capacity 6) # _____

Room Set Up Needed: _____

Equipment Needed: _____
 Purpose of Meeting: _____

The individuals in my organization reside principally in (check one):
 New City Entire Clarkstown School District
 Congers Town of Clarkstown
 Other Rockland County

*I have received and agree to abide by the "Regulations for Use of Library Community Rooms" and understand my organization's responsibility in that regard. I attest that my organization is a **NOT FOR PROFIT** organization. (Please Note: Any change in officers of the organization using the library's meeting rooms must be made aware of the rules and regulations concerning their use.)*

Signature: _____
 Name/Title: _____

___ Approved ___ Disapproved: _____
 Marianne Gallagher, Library Director