

**COASTAL PLAIN REGIONAL LIBRARY SYSTEM
MEETING SPACE APPLICATION**

I understand the procedures for use of library meeting spaces. Yes _____ No _____

Specifically, the following procedures are only a few of the points to note:

1. Maintenance Fees per 3 hour time slot: Carrie Dorsey Perry Memorial Library \$25, CPRL \$25, Irwin County Library \$15, Tifton-Tift County Public Library \$50. Victoria Evans Memorial Library \$15. Cook County Library \$20.
2. All meetings are to be free and open to the public.
3. The program must begin and end during regular library hours.
4. Children must be supervised at the rate of one adult for every seven children for children's programs.
5. The person booking the meeting room, as well as the organization, is responsible for any and all damages that occur to the facilities, furniture and equipment. Cost of repair or replacement will be assessed/completed by library assigned persons and billed to the individual or group using the meeting room when the damage occurs.
6. The user must dispose of any trash and leave floors, chairs and tables clean.
7. You must set up the room yourself and return it as you found it within your time slot.
8. Publicity may not carry the library logo or telephone number.
9. Smoking and alcoholic beverages are not allowed on library property or grounds.
10. Tape of any kind may not be used to hang signs or decorations. Only the hanging mechanism in each room may be used.
11. Light refreshments may be served at some branch libraries. Please check with the branch manager. No supplies are available, but a sink and refrigerator are available in some branches.
12. Advance deliveries are not accepted.

By signing below I acknowledge that I have read and agree to abide by the Coastal Plain Meeting Room Policy and the terms of this agreement.

Branch _____ Event Date _____ Program beginning time _____

Name of Organization/Group requesting room _____

Person making Reservation _____
Print Signature

_____ Library Card Number _____ Home Phone _____ Cell Phone _____ Work Phone _____

Mailing Address

Equipment needed (not guaranteed to be available) _____

Time you plan to arrive to set up? _____ (No entrance before library opens and at library closing time room clean up must be finished and room closed.)

LIBRARY USE ONLY: Approved (Branch/date/time/initials)

Fee paid (date/time/initials) _____ Room checked (date/time/initials) _____