

## Meeting Room Reservation and Use Agreement

Name of Organization/Group:			
	Date of Application:		
Representative's Orland Park Public Library card nu	umber: <u>21315</u>	Expiration Date:	
Representative's Address:			
Representative's Phone Number:			
Representative's Email Address:			
Check the box that best represents your group:  Local group of library patrons Government Nonprofit Business (for non-commercial use)			
Meeting Room Reservation:  A single group may book up to twelve (12) meetings print advance, but no less than ten (10) business days in a unable to provide a library card will be asked to prove Meetings may be scheduled Monday - Friday 9:30 a.m. scheduled start time. All meeting rooms must be vacated How many attendees do you expect at your meeting?	dvance. Representative must be nonprofit status. See the Meeting to 8:30 p.m. Groups may arrive a	at least 18 years old. Nonprofits g Room Policy for more information.	
Date/ Time Requested: Please only request one meeting per form.			
Date of Meeting:	Start Time:	a.m. / p.m.	
Length of Meeting:			
Second Choice Date/ Time Requested:			
Date of Meeting:	Start Time:	a.m. / p.m.	
Audio-Visual Equipment Requested:  Microphones Projector Screens			
I acknowledge that I have read and will abide by the O Rules and Regulations. I will be present throughout the responsible for any willful or accidental damages to the Orland Park Public Library, its Board of Library Trustees accidents should any be incurred arising from or durin	e meeting. I will be responsible for e meeting room or furniture. I m s, all library staff, and the Village o	or all others in the room. I will be ust indemnify and hold harmless the of Orland Park for any and all	

Date

Signature

Ways to Return this form: Return this form to the library by dropping it off at the Welcome Kiosk. Fax this form to the library's fax number: 708-349-8322. Scan this form to email, and send this form to AskOPPL@orlandparklibrary.org.		
Questions?: Call 708-428-5205 with questions about meeting room use.		
Administrative Use Only:  Approved Not Approved		
Date:	Staff Signature:	
Reason if not approved:		
Notification Date:		
Call Email		