

## MAYWOOD PUBLIC LIBRARY

459 Maywood Ave, Maywood, NJ 07607 www.maywoodreads.com 201-845-2915

## MAYWOOD PUBLIC LIBRARY

Application for Use of Meeting Room

Groups wishing to reserve the meeting room should submit a completed application to the Meeting Room Manager two weeks before the selected meeting date. A written application is required for confirmation of booking.

Name of Organization	
Contact Person	Title
Address	
Telephone Number	e-mail
Purpose for which facility is requested _	
Date(s) Requested	
Times Requested From:	To:
Anticipated Attendance:	
I certify that I am the official representative for this organization, and that I am authorized to make this application on their behalf and bind them to the Rules and Regulations of the Maywood Public Library. Said organization agrees to save and hold harmless the Maywood Public Library and the Borough of Maywood, its agents, servants, and administrators from any and all liability arising out of the use of said premises of property. As official representative of this organization, I hereby certify that I have read the Maywood Public Library Meeting Room Policy and agree to comply with that policy.	
Signed	ition in averagination)
(Organization Representative, Title/po	sition in organization)
Date	
Approved(Library Representative)  Date	
Date	