ROOM REQUEST FORM -- TOWNSEND PUBLIC LIBRARY

Return to Library Staff Person or by email: townsendlibrary@cwmars.org

Office Use Only:
Received by
Date
Time

This form is intended for room use during regular library hours only. Rooms may be used only upon the approval of an authorized Townsend Public Library staff member. Not all rooms in the facility are available for public use. The Senior Center and the Library have priority in using these rooms.

No private parties will be authorized.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Avail. Hours	10:30a-4:30p	10:30a-7:30p	10:30a-7:30p	10:30a-7:30p	10:30a-4:30p	No hours	No hours
Write requested hours in this section						Closed on Sat. July & August	X
DATE OF EVENT							

Name of individual responsible for request:							
Contact – Phone:	Email:						
Name of organization (if applicable):							
Number of people attending (approximate if needed):							
Purpose of meeting:							

ROOM PREFERENCE – Not Guaranteed

□ Meeting Hall – large (A) □ Meeting Hall – small (B) □ Whole Meeting Hall □ Trustee Conference Room

If you would like to request any of the study rooms, do not use this form; contact the library. The Library Storytime room is not available for public use.

A/V EQUIPMENT

Use of any A/V equipment MUST BE SPECIFICALLY REQUESTED HERE.

• Availability of AV equipment is not guaranteed.

• Availability of technical assistance is not guaranteed.

Projector	DVD/Blu-ray Player	Will you be using a laptop?	Mac/Apple*	□ Windows/PC			
Screen Only	Mic/Audio	*You must have an HDMI adaptor to connect a Mac to the projector					

• Library is not responsible for technical malfunctions.

LIBRARY STAFF USE ONLY (put initials next to all steps taken)

____ Approved ____ Applicant notified ____ Entered into Assabet – date______

____ Denied ____ Applicant notified – date_____

____ A/V use approved – name of staff person who will oversee _____

Name of room reserved:_____