

PROGRAM ROOM APPLICATION FORM

HUNTLEY AREA PUBLIC LIBRARY
11000 Ruth Road
Huntley, IL 60142
PHONE 847/669-5386 FAX 847/669-5439

Name of group, organization or individual: _____

Type of group: Not-for-profit
 For-profit (\$25 per session charge – Training or informational meetings only)

Date(s) and time(s) (request on hour or on half hour; within next four weeks): _____

Purpose(s) of meeting(s): _____

Name of Huntley Area Public Library Cardholder: _____

Huntley Area Public Library Card Number: _____

Address: _____

Phone Number (Day): _____ (Evening): _____

Name and phone number of person the library or the public may contact if there are questions:

Number expected to attend (min. 4 / max. 35): _____

We will/will not serve refreshments: (Yes / No)

Chairs, tables, screen, whiteboard, wireless connection, and electricity are available for use. Library does not provide electronic equipment.

Cleaning supplies and electric carpet sweeper are available if needed; ask at the Children's Desk.

I have read the Program Room Policy, and while using the Program Room my group agrees to abide by the Policy and to indemnify and hold harmless the Huntley Area Public Library District and/or its staff and Board of Trustees of any and all consequences resulting from the use of the Program Room.

Signature

Date

For Internal Use Only (Initial and Date):	
_____ Valid Huntley Area Public Library card	_____ Room check
_____ Deposit collected	_____ Deposit returned
_____ Applicable fees collected	_____ Applicable fees turned in
_____ Added to Program Room calendar	