JAY C. BYERS MEMORIAL LIBRARY

MEETING ROOM

Please Print

Date_____

I, the undersigned, have read and understand the Jay C. Byers Memorial Library's meeting room policy. According to the policy, I meet their requirements and shall follow the restrictions listed or any other guidelines that the Library Board or Library Director stipulates at the time of use. I also agree that should any damage occur or cleaning is required after my use of the room, I will make restitution to the satisfaction of the Library Board or Library Director.

I have included a copy of my driver's license, a \$25.00 refundable deposit, and I understand that my group's meeting will be concluded by 9:00 p.m.

Organization/Group:

Purpose of the Meeting:

Signature: _____

Printed Name of Responsible Party: _____

Mailing Address:

Phone
Number:_____

Librarian:

Adopted 7/2019 Reviewed 4/18/22