Application for Use of the New Brunswick Free Public Library Meeting Room or the Henry Guest House.

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Organization						
Date of Application						
Has the organization p	revious	sly used the Libra	ry facilitie	esYes	No	
Activities Planned						
Name, Address and Card Number of Applicant						
Name & Address of Contact Person						
Contact Phone, Fax, E-Mail. Star preferred.	Voice: FAX: Email:	() ()_				
The undersigned agrees they are authorized by their organization to commit their organization to complying with the policies and rules governing the use of the Meeting Room and the Henry Guest House. The library will supply contact information for the person and organization upon request from a member of the public.						
Signature  Print Name						
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Specific Date Desired (One date per form)				ected endance		
Arrival Time*			Dep	parture Time		
Location Preferences		Library Meeting Room ☐ Henry Guest House ☐ Date and Time Important, will take either location ☐				
Kitchen Facilities (Sinl	c only) <sup>†</sup>	Needed □	Not Nee	eded 🗆		
Will Food be served?	No □	Podium Needed □				
Approved/ Disapproved Notified by FAX   Mail			_		nitials nitials	
Return form to Nancy R NJ 08901-3026), email (					vingston Ave, New Bruns	wick

The organization using the facilities is responsible for set up and clean up. Meetings must be without charge and the seeking of donations is prohibited. Nothing may be sold nor may orders be taken.

Meetings including setup and cleanup must be during times the Library is open. If the library closes at 5:00 p.m., the meeting and cleanup must be done by 4:45 p.m., if the library closes at 9:00 p.m., by 8:45 p.m.

<sup>&</sup>lt;sup>†</sup> Only Carl T. Valenti Community Room (Sink Side) has access.