



**OREGON
PUBLIC
LIBRARY**

256 Brook Street
Oregon, Wisconsin 53575
oregonlibrary.org
Phone: (608) 835-3656

SUE AMES MEETING ROOM USE APPLICATION

This form is to be used for booking the library's meeting room. Applicant will be notified of confirmation within three business days after the library receives the completed application.

Organization or Group Name _____

Contact Person _____

Phone: Days _____ **Evenings** _____

Contact Person's E-mail _____

I would like to be contacted via Email Phone

Dates Requested _____

Times Requested _____

Purpose of the meeting room use _____

Anticipated attendance _____

The undersigned user of the meeting room has read the Oregon Public Library Meeting Room Policy and understands and agrees to abide by the guidelines and rules described therein. Failure to abide by these rules may disqualify the organization from future use of the room. The user hereby indemnifies and holds harmless the Village of Oregon, its Library Board, and provider agency employees and volunteers from all liability directly or indirectly related to an event or meeting.

Signature _____ **Date** _____
(Signature of Representative)

Approved _____ **Date** _____