

CONFERENCE ROOM APPLICATION

| Applicant: | | | | |
|---|--|---|--|--|
| Organization (if applicable) | | | | |
| Library Card Number | | | | |
| FOR ADVANCE RESERVATIONS, PLEASE PROVIDE THE FOLLOWING: | | | | |
| Address | | | | |
| Home Phone | Business | Cell | | |
| E-mail address | | | | |
| Optional Contact/Designee: | | | | |
| Contact/Designee Library Card Number: | | | | |
| Date(s) needed | | | | |
| Reservation time: Begin | End | Expected Attendance: _ | | |
| Library Location | | | | |
| Purpose of meeting | | | | |
| ROOMS MUST BE VACATED AT LEAST 30 MINUTES BEFORE LIBRARY CLOSING TIME. NO FOOD OR BEVERAGES, EXCEPT BOTTLED WATER, ARE ALLOWED IN CONFERENCE ROOMS. STAFF MAY CANCEL RESERVATION IF APPLICANT OR APPLICANT'S DESIGNEE IS NOT PRESENT WITHIN 30 MINUTES AFTER RESERVATION START TIME. THIS APPLICATION IS VALID FOR 90 DAYS FROM DATE OF RECEIPT. Check in with staff upon arrival and give notice when finished. Staff will open a room <u>only</u> for applicant or applicant's designee. Applicant or applicant's designee must be present whenever participants are present. Each conference room includes a white board, table, and 6-10 chairs, depending on the maximum occupancy allowed. <i>I</i>, the undersigned, have read and agree to abide by the Greenville County Library System's Meeting Spaces Use Policy, Regulations and Application instructions. I understand that I am responsible for the use and care of the meeting space. I will hold the Greenville County Library System harmless for any damages to property and person while our group or organization uses Library facilities. I understand that meeting space requests are considered pending until written confirmation is received from library staff. Applicant Signature <u>Date</u> | | | | |
| FAX NUMBERS FOR LIBRARY LOCATIONS | | | | |
| Anderson Rd. Branch2Augusta Rd. Branch2Berea Branch2Five Forks Branch2Fountain Inn Branch8Greer Branch8 | 269-3986 277-2673 246-1765 234-4997 862-6376 377-1422 · information about roor | Hughes Main Library Mauldin Branch Pelham Road Branch Simpsonville Branch Taylors Branch Travelers Rest Branch m availability or to add or change | | |

| FOR LIBRARY USE ONLY | | | | |
|---------------------------------------|-------------------------------|-----------|--|--|
| Additional requested dates and times: | Date confirmation email sent: | Initials: | | |
| | Date confirmation email sent: | Initials: | | |