



LAPEER DISTRICT LIBRARY

Marguerite deAngeli Branch

921 W. Nepessing St. Lapeer, MI 48446

810-664-6971 Fax: 810-664-5581

Monday-Thursday: 9 am - 8 pm Friday-Saturday: 9 am - 5 pm

Sunday: 1 pm - 5 pm (closed during summer)

Meeting Room Policy and Request Form

- The meeting room may be reserved by non-profit groups only.
- Please check with library staff regarding room availability before turning in this form.
- Monthly reservations may be set through the end of the calendar year. Check with library staff regarding other room usage requests.
- The room is available only during library hours.
- No meetings should start until fifteen minutes after the library opens. The room should be returned to its original condition and vacated at least fifteen minutes before the library closes.
- Chairs and tables are available upon request but you are responsible for set-up and tear-down.
- No extra time outside of library hours will be given for set-up or tear-down. Make sure that you include this time in your room reservation.
- Library programming has precedence over public usage. We reserve the right to cancel outside group usage with one week's notice.
- We must have contact information for your group.
- Do NOT print or publish the library's telephone number on your publicity.
- Selling or promoting of products/services is prohibited without prior written consent from the director or a department head.
- You are welcome to serve food; however, we provide no kitchen, utensils, or facilities cleanup. Smoking and alcoholic beverages are prohibited on library property.
- No audiovisual equipment will be provided but the meeting room's pull down screen may be used.
- Your participants must use street parking (Washington Street, Louis Cramton Street, W. Nepessing), as we must reserve parking lot usage for library patrons.
- Damages are the responsibility of the group.
- Maximum Room Occupancy is 45.

Last update: 1/17/2013

Today's date: _____ Reservation date: _____

Time: From _____ To _____

Circle one: One Time Reservation Monthly Reservation

Program Name: _____

Brief Program Description: _____

Organization name: _____

Address: _____

Contact Person: _____

Phone: _____

Email: _____

Event open to the Public: Yes No

I have read the Lapeer District Library Meeting Room policy and agree to abide by its terms. I confirm that the group information above is correct.

Signature: _____

Date: _____

Return this completed form to us NO LESS THAN ONE WEEK prior to your meeting.

Please be sure to give the number of people in attendance to the staff member at the service center before you leave.

Staff Use Only:

Comments: _____

in Attendance: _____ Staff Initials: _____