SAC AND FOX NATIONAL PUBLIC LIBRARY

MEETING ROOM USE FORM

Date O	f Meeting:	Time:	a.m. /p.m. to	a.m./p.m.	
Name o	of Group:				
Addres	ss:				
Phone:		Email:			
Numbe	er in Attendance:				
	The Library requires a not have a sign-in shee			records. If you do	
	If meeting takes place after regular library hours, you will be responsible for seeing that the library is properly secured after the meeting. Capitol Police (Security) will be notified that you will be meeting after regular hours.				
	Children with adults attending any meeting must be properly supervised at all times. DURING REGULAR LIBRARY HOURS THEY MAY BE ALLOWED TO READ BOOKS OR WATCH VIDEOS WHILE THE ADULTS ARE ATTENDING A MEETING.				
	The meeting room will be left in a neat condition (trash picked up and placed in trash receptacle, and coffee pot cleaned, if used, etc.)				
	Any damages or losses caused to the meeting room/library will be paid by the meeting group.				
4	Smoking is <u>NOT</u> allow	ed inside the meeting	room.		
	of Responsible Person:	PLEASE P	RINT		
~-	PLEASE PI	RINT			
Signati	ire:		Date:		

Meeting Room Guest Sign In Sheet:				
Name:		From:		
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