Burlington Public Library Meeting Room Application

	LETE THIS	FORM AND	RETURN TO THE	LIBRARY AT LEAST '	
ROOM TO BE	USED:				
DATE(S) REQUI	ESTED:				
SNOW DATES (if applicabl	e):			
TIME:	TO:				
Availability:					
Rooms Available					
Meeting Rooms	Kitchen Facilities	Capacity	Burlington Non-Profit or Civic Groups	For-Profit or Non-Burlington groups (Charging participants is prohibited)	Availability
*Anne Walluk Community Room	Yes	100	No Charge	\$160 for 8 hours; \$80 for 4 hours; \$25 Hour	Reserve up to 90 days; One reservation per month
*Conference Room	No	10 or 12	No Charge	\$10 hour	Reserve up to 90 days; One reservation per month
Children's & Teen Program Room	No	25	No charge	Not Available	Reserve up to 90 days; One reservation per month
*May be availa	able for use v	when the libr	ary is not open.		
NAME OF ORGA	ANIZATION	:			
Telephone #: Email: Please note that the town may not be snow plowing during non-library hours.					
Non-profit? Stat	ff may ask t	hat a 501(0	snow plowing during () (3) form be prese e paid three days bef	ented.	
ESTIMATED AT	TENDANCI	E	SPEAI	KER	

PROGRAM (briefly describe) _____

WILL YOU BE SERVING REFRESHMENTS? Yes No Alcohol Beverages(See Town Ordinance adopted on 6/20/2017)
PERSON IN CHARGE OF REFRESHMENTS: Telephone #:
EQUIPMENT AVAILABLE: (check items you would like to use, specifying number of chairs/tables) TABLES CHAIRS LECTERN EASEL DVD Player * LCD PROJECTOR * PROJECTION SCREEN * * Staff will set up or train responsible person on this equipment.
Mandatory fees are not required for a Burlington non-profit organization to use the community/conference rooms. However, because the library budget is limited, we are suggesting you or your organization make a monetary donation to our materials fund. We thank you for your community spirit.
PLEASE MAKE OUT CHECKS TO THE BURLINGTON PUBLIC LIBRARY. Our organization (I) will make a \$20.00 donation for a children's title. Our organization (I) will make a \$30.00 donation for an adult title. Our organization (I) will make a \$50.00 donation towards an audio book. Other amount \$
Signature of person in charge of the program:
Signature of person in charge of refreshments:
Please initial that you have received and read the Meeting Room Policy:
LIBRARY USE ONLY: STAFF'S INITIALS
DATE PUT ON THE "BIG" CALENDAR/
DATE OF DONATION OR FEE REC'D AMOUNT \$//
APPLICATION APPROVED//
LIBRARY DDIRECTOR'S SIGNATURE: