Application for Use of Meeting Rooms

Name of Organization/Group: _____________________________________________________

Person Responsible for Meeting Reservation: ________________________________________

Telephone Number: __________________________________________________________________

Purpose of Meeting: __________________________________________________________________

Room Reserved:                                             Special Needs:

_______ Conference Room (capacity 30)             _______ Lectern

_______ Meeting Room (capacity 30)                _______ Microphone

_______ Auditorium (capacity 250)                 _______ Tables

Date: ____________________________                _______ Chairs

Day of Week: ____________________________         _______ Projection Screen

Time In: _______   Time Out: ____________         _______ Projection Cart

Actual Starting Time: ____________________________ _______ Extension Cord

_______ ___________ ___________                     _______ Power Strip

_______ ___________ ___________                     _______ TV/VCR/DVD

Will there be publicity for this meeting or event? ________________________________

If yes, please provide a copy or link to any advertisement for approval by Executive Director before it is circulated, failure to do so may result in the cancellation of your reservation.

Please read and sign complete meeting room policy and guidelines on the reverse side of this application.

Adopted by NFPL Board of Trustees 9-26-2002
Revised and Adopted by NFPL Board of Trustees 6-26-2012
Revised and Adopted by NFPL Board of Trustees 3-26-2014
Policies Guiding the Use of Meeting Rooms

1) A meeting room may be used by any group provided the following conditions are met:
   a. No admission, donation or other fees are charged or collected.
   b. No sales or other commercial transactions occur except for library and library related fundraisers.
   c. No products, services, or memberships may be advertised, solicited, or sold.
   d. The meeting is open to the public and news media.

2) Meeting rooms may be reserved for meetings during regular library hours by a responsible adult on a first come, first served basis with library events having the highest priority.

3) Meeting rooms must be used during hours the library is open. They must be vacated at least 30 minutes before the library closes.

4) For any meeting requiring equipment or furniture set up, a 48-hour advance reservation is required.

5) Meeting rooms must be left in an orderly, unlittered condition.

6) Meetings may be booked up to 3 months in advance; no more than 2 meetings by the same group per month are allowed.

7) No refreshments may be served without the approval of library management. Smoking and alcoholic beverages are prohibited.

8) The applicant agrees to pay for any and all damages to library property including but not limited to walls, floors, grounds, equipment and furniture while applicant is using property.

9) Permission to use a meeting room does not constitute an endorsement by the library of a program or point of view expressed. Except as a designation of location, the name of the Library may not be used in any publicity relating to use of meeting rooms.

Publicity must be approved by the Executive Director before it is circulated and must include the following statement, "The Niagara Falls Public Library does not endorse or advocate the views of any group using our Meeting Room". Failure to obtain approval will result in cancellation of reservation.

10) The applicant assumes responsibility for participant accommodations (e.g. assistive listening devices, etc.) and specific articles of compliance as required by the Americans with Disabilities Act.

11) Meetings must be conducted in such a way as not to disturb library operations. The applicant is responsible for managing orderly behavior of all attendees. Adult supervision is required for any group of minors. Applicants and program participants are expected to conform to the Library’s Code of Conduct, copies of which are available on request.

______________________________________  __________________
Signature                                      Date

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