Date Received:

Williamsburg Public Library Meeting Room Application for Use

Turn in this completed form to the library with payment.

Name of Organization		
Contact Person		
Address		
Phone Email		
Date(s)		
Time		
Approximate Number of Persons Attending		
Room Request – Please check one of the following	ng options:	
Meeting Room A (Large Meeting Room):		
Community Groups/Non-Profit Groups (\$25.00 fee)		
Business Groups/Individual Groups (\$50.00 fee)		
Meeting Room B (Small Meeting Room):		
Community Groups/Non-Pr	rofit Groups (\$15.00 fee)	
Business Groups/Individual	Groups (\$30.00 fee)	
Rental Fee there is a refundable \$25.00 damage d	yond are an additional \$5.00 per hour. In addition to the Room eposit. Payment (in the form of two (2) checks) is due at the care subject to a \$30.00 fee in addition to the rental charge.	
	f library hours, you will need to coordinate with a librarian to dditionally, library staff will not be available for technical	
I have been provided a copy of the Meeting Room that may be incurred during my use of the meetin	Policies and agree to its terms I am responsible for any costs g room.	
Signature:	Date:	
Name (please print)		
After my event, please shred my deposit of After my event I will pick up my deposit ch		