



Peotone Public Library District

515 N. First St.
Peotone, IL 60468
708/258-3436
Fax 708/258-9796
www.peotonelibrary.org

BOOKING APPLICATION-PUBLIC MEETING ROOMS

Date of Application: _____

Name of organization: _____

Address: _____ (street)
_____ (city)
_____ (state and zip)

Phone: _____

Person Responsible for Application: _____

Home Phone: _____ Work Phone: _____
E-mail address (optional): _____

Head of organization if other than applicant (if applicable) or other contact person:

Home phone: _____ Work Phone: _____

Date of meeting _____

Frequency of use: One Time ___ Other (Please explain) _____

Hours of use: _____ (Begin) _____ (End)

Type of Meeting/Program (Please Describe): _____

Anticipated Attendance: _____

Tables: _____ Chairs: _____

Please list any materials you anticipate bringing into the library: _____

Room to be Reserved: Small Meeting Room: _____ Large Meeting Room: _____
(12 total occupancy) (48 total occupancy)

I state the above information is true and correct. I further state that I have received a copy of the Policy adopted by the Board of Trustees of the Peotone Public Library District, we will abide by and comply fully with that policy at all times, and the above group shall indemnify and hold harmless the Board of Trustees of the Peotone Public Library District from and against any loss, cost, expense, or damage occasioned by the use of the meeting room(s) and/or our failure to follow any part of this policy.

Applicant Signature: _____

\$25.00 Room Deposit paid/ Check Number: _____

Approved By: _____ Date: _____

DISCLAIMER:

The Peotone Public Library District, by granting permission for the use of the Library facilities to any party, does not necessarily share, condone, or advocate any of the beliefs, purposes, or actions of the person, persons, organization, or activities, which are using the facility either while on or off the premises owned by the Peotone Public Library District.

Updated 2/7/2017