

Meeting Room Reservation Request

Inquiries to Debora Hoffman
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735 Main Street, Waltham 02451

TODAY's Date: _____

Name of Non-Profit Organization: _____

Tax-exempt number: _____

Waltham based? _____ Annual budget under \$10,000? _____
If the answer to either or both of these questions is no, a fee will be required.

Lecture Hall: \$75 / 3 hours Trustees Room, or Class Room A or B: \$35 / 3 hours
Payable to the Waltham Public Library

All meetings and programs must be free, and open and accessible to any member of the public. Meeting rooms are not available for the use of private individuals or for-profit organizations. Permission to use a library meeting room does not imply that the Waltham Public Library, staff, Board of Trustees or the City of Waltham endorses the aims, actions or policies of any group.

Name & Title of Contact Person: _____

Phone: _____ Email: _____

Address: _____

DAY & DATE of Meeting: _____

TIME ORGANIZERS TO ARRIVE: _____

GROUP Size: _____

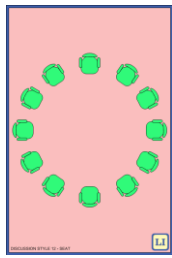
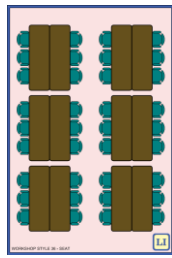
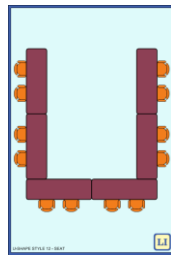
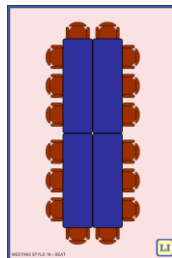
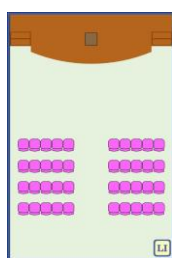
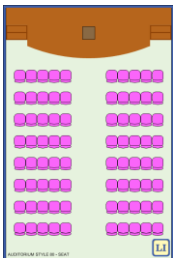
MEETING TIME: start _____ end _____
(including set-up & breakdown)

PURPOSE of Meeting: _____

LECTURE HALL SET-UP: Number of chairs: _____
(up to 100 if no tables)

Number of tables: _____
(up to 10)

Arrangement: Audience (100) Aud w/ kids (40 chairs) Conference (16-20) U Meeting (12-30) Workshop (24-36) Circle (up to 30)



Organization Name: _____

EQUIPMENT: *Library staff may not be available to assist. Please arrange for orientation in advance of the event.*

Lecture Hall only:

- _____ Overhead video projector
- _____ Piano: \$40 fee, payable to the
*Friends of the Waltham Public Library or
FWPL; see Piano Use Policy*

Either Room:

- _____ 35 mm slide projector
- _____ DVD/VHS player and monitor
- _____ Computer projector

Signature of Contact Person: _____

The person signing this request form acknowledges that s/he has read the library's rules and meeting room policies, and as personal responsibility for the discipline of those in attendance at the meeting as well as the care of the meeting room.

LIBRARY USE ONLY

Room Assigned:

Fee:

Date paid:

Staff initials: