



# Franklin Public Library Meeting Room Application

44 E. Fourth Street · Franklin, Ohio 45005 · 937-746-2665 · 937-746-2847 (Fax)

Date of Meeting: \_\_\_\_\_ Time of Meeting: \_\_\_\_\_ until \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Purpose/Subject of Meeting: \_\_\_\_\_

Estimated Attendance: \_\_\_\_\_ Is the meeting open to the public? YES NO

Name of person who will be in charge at the meeting itself: \_\_\_\_\_

Attendees are charged \$ \_\_\_\_\_ for what purpose \_\_\_\_\_ ?

Name of Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

May the library give your telephone number to anyone inquiring about your organization? YES NO

Please indicate if you need any of the following equipment.

- Computer Projector       Overhead Projector       TV with VCR or DVD player
- Microphone       Marker Board       Videoconference Equipment

If you need video conferencing equipment, the site we connect with must be IP based **not** ISDN or ATM.

The library IP address is: 66.213.106.90. What is the connecting IP address? \_\_\_\_\_

**Applicant please initial each:**

- \_\_\_\_\_ I have received a copy of the Franklin Public Library's Meeting Room Policy and agree to comply with all provisions of that policy (see reverse side of application).
- \_\_\_\_\_ I certify that this meeting is NOT to promote, advertise or lead to the sale of any product or service.
- \_\_\_\_\_ No money is collected or solicited from participants for any purpose except as stated above.

**Donations for the use of a meeting room are greatly appreciated.**

\_\_\_\_\_  
Signature of Contact Person

\_\_\_\_\_  
Date

**LIBRARY USE ONLY**

Application Taken By \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Reason for Denial \_\_\_\_\_

Meeting Room:      Mary Hankinson (Side A)      Mary Hankinson (Side B)      Mary Novak