

Discover. Connect. Engage.

MEETING ROOM AGREEMENT

Application Date: Estimated Attendance:							
Name of O	rganizati	on:					
Name and	Type of I	Program:					
Name of R	epresent	ative (please	print):				
Address:City:							
				Phone:			
Signature:							
Other Equipr	ment Availa on for use dinator at	ble: Dry Erase-B	oard/ Easel, Co 's updated A\ s in advance o	Ray Player, Podiur offee and Hot Wate / equipment is n of meeting time.	r pots		e made with the Meeting
Rocky River Public Library reserves the right to reassign spaces as necessary. Your signature indicates that the Meeting Room Policy <u>https://rrpl.org/meeting-rooms/</u> is understood, will be adhered to, and that the guidelines for use will be conveyed to your membership.							
Specify exact date and times for each reservation: The period of this Meeting Room Agreement is September 1 st through August 31 st . ROOMS:							
MONTH	DATE	MEETING	MEETING	ROOM:	SET-UP:	EQUIPMENT:	
		START TIME	END TIME	Auditorium (A) or	Theater, Classroom,		Auditorium (A): Max Capacity 108
				Community	Open		(chairs only) / 65
				Room (CR)	Square		(tables & chairs)
SEPT							Community Door
OCT							Community Room (CR): Max Capacity 50
NOV							(chairs only) / 24
DEC							(tables & chairs)
JAN							SETUP:
FEB							Standard room setup
MARCH							styles available are
APRIL							Theatre style (chairs only), Open Square
MAY							(tables & chairs in
JUNE							a square), and
JULY							Classroom style (table & chairs in rows).
AUG							Other setups options
							are available by request