

North Hampton Public Library
Meeting Room Booking

--PLEASE PRINT--

This form is to be completed and signed by those wishing to use the library

Organization _____

Date(s) of Meeting(s) _____

Contact Person (must be North Hampton resident) _____

Phone _____ Email _____

Address _____

Start Time: _____ End Time: (must end when library closes) _____

Use of facilities -- Check as appropriate:

- Craig Meeting Room
- Teen/Study Room
- Additional facilities (specify)

Use of Equipment -- Check as appropriate:

- Group will provide own equipment as needed
- Group will need to use library equipment if available:

- HDMI Cable
- Laptop (Windows 10)
- Microphone
- Smart TV

I have received and read a copy of the North Hampton Public Library meeting room policy.

signed _____ date _____

approved _____ date _____

Agreement not valid without approval of library director