

OSSINING PUBLIC LIBRARY
Use of Meeting and Performance Spaces by Outside Organizations

Application

Name of organization: _____ Date: _____

Type (check one): Government _____ Non-Profit* _____ Commercial _____

Contact person: _____ Title: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Date(s) requested: _____

Time (include set-up and clean-up): _____ to _____ Start time of event: _____

Description of event/meeting: _____

Estimated attendance: _____ Age of audience: _____

Person in charge (if different from contact person): _____

Equipment requested: _____

____ Alcohol will be served** ____ Food will be served** ____ Kitchen is requested**

***Non-Profit organizations MUST HAVE or BE ELIGIBLE FOR Non-Profit status with the IRS.**

****A deposit of _____ is required if food or drink will be served and/or if kitchen will be used.**

I hereby apply for the use of meeting/performance space as specified above and in keeping with the procedures and regulations as described in the *Regulations for the Use of Meeting and Performance Spaces by Outside Organizations*.

Signature: _____ Date: _____

Return to: Meeting Room Coordinator or FAX: 914-941-7464
 Ossining Public Library Attn: Meeting Room Coordinator
 53 Croton Ave., Ossining, NY 10562

Questions: Phone: 914-941-2416 or Email: jtrapasso@ossininglibrary.org

Office use only

Approved: _____ *Date:* _____

Space reserved: _____ *Fee:* _____