

Greenwood Lake Public Library
P.O. Box 1139
Greenwood Lake, NY 10925
Phone: 477-8377 / Fax: 477-8397

Note: Application must be made no less than one week prior to intended date of use.

Date and/or Dates	Day(s) of week	Time: From	To
Group or organization requesting use			
Representative of group or organization		Estimated # of people	
Representative's address		Phone number	
Special services/arrangements needed	() Yes-Please describe	() No	
Will admission or fee be charged?	() Yes – State amount and purpose	() No	
Will use of the kitchen be required?	() Yes – Briefly describe	() No	

Briefly describe nature of activity: _____			

Application Note: A fee of \$25.00 and group's certificate of insurance naming the Library as additionally insured must accompany this application. The Library Director and/or Board of Trustees reserves the right to deny the use of Library grounds and/or facilities to anyone if, in the opinion of the Director and/or Board, it would not be in the best interest of the Library.

“The undersigned hereby certifies that he/she has read, fully understands and agrees to abide by all of the regulations and conditions set forth in the *Program Room Policy* document attached to this form.”

Date _____

() Approved () Disapproved – State reason below

Date

[illegible]

- Original with copy of check and insurance certification in kept on file by Director
- Application copy (both sides) to applicant