

Meeting Room Application
Paola Free Library
Phone: 913-259-3655 Fax: 913-259-3656
Email: mmenefee@paolagov.org

Name of Organization _____

Contact Person _____

Address _____

Phone _____ E-mail _____

Type of Non-Profit Group: Educational _____
 Cultural _____
 Political _____
 Professional _____
 Church Related _____
 Other (Please specify _____)

Space needed: ☐ Study Room (suitable for up to 8 people)
 ☐ Meeting Room (suitable for up to 25 people)
 ☐ Other (please describe)

Date room is needed _____ Time needed _____

The library may ask the group to repay the cost of any repairs for damage done by my group during our meetings. I have read the Meeting room policy of the Paola Free Library and the group, which I represent, agrees to follow these guidelines.

Reservation will be reviewed by Library Director or Assistant Director, who will call or e-mail the applicant if there are issues with the reservation.

Signature of Representative

Date

Signature of Library Director/Assistant Director

Date

Staff Use Only: ☐ Checked Google Calendar ☐ Placed reservation on Google Calendar

Initial:

Date:

