



# Ocean County Library

Connecting People... Building Community

[www.theoceancountylibrary.org](http://www.theoceancountylibrary.org)

732-349-6200

## APPLICATION FOR USE OF MEETING ROOM SPACE

Please return this form to the library branch where you would like your meeting/event held.

Information for Library branches may be found at this link:

<http://theoceancountylibrary.org/Branches/branches.htm>

**ORGANIZATION** \_\_\_\_\_

**Name** (individual applying) \_\_\_\_\_

**Street** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **ext.** \_\_\_\_\_ **Email** \_\_\_\_\_

Events must take place during regular library hours.

**Event Date(s)** \_\_\_\_\_ **Event Time(s)** Start \_\_\_\_\_ End \_\_\_\_\_

**Event Description** \_\_\_\_\_

**Estimated # Attending** \_\_\_\_\_

**Your organization is responsible for meeting room set-up and breakdown. OCL does not provide refreshments.**  
Tables, chairs, lectern, microphone, DVD/VCR may be available for your use. Equipment requests must be made in advance.

**Please list equipment needs:** (Example: 4 tables & 16 chairs, 50 chairs & lectern, etc.)

My organization is located: **IN**  **OUT of**  Ocean County **AND** is a: Non-Profit  Government  Business

My **Non-Profit/Govt. group** is within library guidelines of a **maximum of six** uses per year: YES  NO

**OR** My **Business** is within library guidelines of a **maximum of two** uses per year: YES  NO

**Organizations located in Ocean County may use library space FREE of charge.**

Organizations located **outside of Ocean County** please include a **fee of \$50.00 (per use)** payable to Ocean County Library.

The policy and application may be found at this link:

[http://theoceancountylibrary.org/Services/policies\\_fees.htm#meetingroom](http://theoceancountylibrary.org/Services/policies_fees.htm#meetingroom)

**Use of library space does not indicate OCL sponsorship of your event.**

**I have read and agree to comply with this application and the policy of the Library Commission regarding the use of library space:**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Print Name/Position** \_\_\_\_\_

### FOR LIBRARY USE ONLY

Date Request Rec'd \_\_\_\_\_ Date Confirmed \_\_\_\_\_ By Staff (Initials) \_\_\_\_\_

Staff Contact: Name \_\_\_\_\_ Branch/Department \_\_\_\_\_ ext# \_\_\_\_\_

Name of Space Reserved \_\_\_\_\_ Branch \_\_\_\_\_

Notes \_\_\_\_\_