

SOUTH BRANCH MEETING ROOM REQUEST FORM  
KOKOMO-HOWARD COUNTY PUBLIC LIBRARY  
Use one form for each meeting date. Copy form as needed.

TODAY'S DATE: \_\_\_\_\_ DATE OF MEETING \_\_\_\_\_

TIME OF MEETING: \_\_\_\_\_ - \_\_\_\_\_ AM/PM

GROUP NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

DAY PHONE: \_\_\_\_\_ EVENING PHONE: \_\_\_\_\_

**ROOM REQUESTED** (If specific room is requested place "R" by the room)

A/Tulip Room \_\_\_\_\_ C/Cardinal Room \_\_\_\_\_  
(15 @ T&C or 25 chairs only) (30@ T&C or 50 chairs only)

B/Peony Room \_\_\_\_\_ B/C Peony/Cardinal \_\_\_\_\_ Kitchenette \_\_\_\_\_  
(30 @ T&C or 50 chairs only) (60 @ T&C or 100 chairs only)

**DETAILS FOR SETUP:** Number of people \_\_\_\_\_  
Tables & Chairs \_\_\_\_\_ Chairs only \_\_\_\_\_

U shape (chairs on 1 side) \_\_\_\_\_

Square \_\_\_\_\_

Rows (chairs on both sides) \_\_\_\_\_

Classroom style (all facing front) \_\_\_\_\_

Scattered \_\_\_\_\_

Head table \_\_\_\_\_ how many at head table \_\_\_\_\_ Head table w/podium no chairs \_\_\_\_\_

Purpose and location of extra tables \_\_\_\_\_

**EQUIPMENT REQUESTED:**

TV/VCR/DVD \_\_\_\_\_ Overhead projector \_\_\_\_\_ Projector for laptop \_\_\_\_\_  
Projector & laptop \_\_\_\_\_ Dry erase/chalk board \_\_\_\_\_ Free standing podium \_\_\_\_\_ Tabletop lectern \_\_\_\_\_  
Coffee pot – 42 cup \_\_\_\_\_ Coffee pot – 10 cup \_\_\_\_\_ punch bowl \_\_\_\_\_  
Other \_\_\_\_\_

- \_\_\_\_\_ Groups are required to abide by the rules governing the use of the library and of the meeting rooms.
- \_\_\_\_\_ Library equipment and furnishings, including tables, must be protected from damage by glue, paint, heat, etc. Replacement cost for the tables is \$245.00.
- \_\_\_\_\_ Food is allowed ONLY in the meeting rooms.
- \_\_\_\_\_ Red Beverages are not allowed in the meeting rooms.
- \_\_\_\_\_ The room must be left as it was found.
- \_\_\_\_\_ Candles may be used for decoration, but may not be lit.
- \_\_\_\_\_ Litter must be bagged tied and placed next to the trash receptacle. Extra bags are available if needed.

My signature below signifies I accept responsibility and agree to pay the library for any damages to the room and/or equipment, which may occur during use of the meeting rooms.

Signature of person taking responsibility for the room. \_\_\_\_\_

Room inspected and locked by: (Initials) \_\_\_\_\_