

Midland Park Memorial Library  
250 Godwin Avenue  
Midland Park, NJ 07432  
(201) 444-2390

**Application for Use of Library Meeting Room(s)**

(Instructions)

- A. Print or Type
- B. Return application to the library
- C. Make check payable to Midland Park Memorial Library and return with this application
- D. Submit Application and Liability Insurance on a yearly basis

Name of Organization or Group: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Street: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Alternate Contact Person (Optional): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Date(s) Requested: \_\_\_\_\_ Year: \_\_\_\_\_

Meeting Time: Start \_\_\_\_\_ Finish \_\_\_\_\_

Occasion: \_\_\_\_\_

Number of People Attending: \_\_\_\_\_

Will you need chairs? YES \_\_\_\_\_ NO \_\_\_\_\_

If so, state the date of when you will set up chairs: \_\_\_\_\_

**FEE FOR ONE-TIME USE:**

**Please choose one: (\$35.00 for non-profit organizations and \$60.00 for for-profit organizations)**

**Englishman Room: \_\_\_\_\_ (\$35.00/\$60.00) Community Room: \_\_\_\_\_ (\$35.00/\$60.00)**

Will food be served? YES \_\_\_\_\_ NO \_\_\_\_\_

Library equipment required? (If available) YES \_\_\_\_\_ NO \_\_\_\_\_

Will your group use the kitchen? YES \_\_\_\_\_ NO \_\_\_\_\_ (Stove, refrigerator, etc.)

**All items used, including rooms, must be left clean and in order. No special equipment, decorations, or special effects may be employed without permission.**

I have read and agree to the Midland Park Memorial Library Meeting Room Rules and Regulations and Policies.

\_\_\_\_\_  
Sign Here