

**Dobbs Ferry Public Library**  
**Meeting Room Use Request Form**  
**Please Print**

Room Requested (please check)  Community  Conference

Applicant's name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact phone #: \_\_\_\_\_

Email: \_\_\_\_\_

DATE: \_\_\_\_\_

**Event details**

Title/description: \_\_\_\_\_

Start time: \_\_\_\_\_ End time: \_\_\_\_\_

Total attendees: \_\_\_\_\_

Refreshments (Community Room Only;.Applicant responsible for cleaning up room)

YES  Coffee pot  Microwave  NO

**Equipment required (indicate number)**

Tables  Chairs  DVD/projector  CD player  Piano

Podium  Microphone  Other (indicate) \_\_\_\_\_

**FEES: Due no later than one week before event**

Community Room: \$75.00 for up to 3 hours, during library hours; \$100.00 after library hours

Conference Room , library hours only \$25.00 for up to 2 hours

\$20.00 per hour each additional hour, or any part of hour.

Piano rental Fee: \$20.00

**Security Deposits**

Any organization using library facilities must pay a (refundable) security deposit of \$50.00

Additional security deposit :\$100.00 for use of AV and \$100.00 for use of piano

We accept cash or check (payable to Dobbs Ferry Public Library).

All written press releases and other publicity items mentioning the Library **must be approved**, in Advance by the Library Director or designee; in writing **no less than one week in advance of publication, posting or distribution.**

All publicity not sponsored by the Library or Friends of the Library, must include the following (or equivalent), as a disclaimer: **"This program is neither sponsored by nor affiliated with the Dobbs Ferry Public Library"**

The Library does not have custodial services available to clean the facilities or open and close the building after library hours.

Applicants are responsible for set up and clean up of facility used, and for restoring the facility to its original condition after completion of the scheduled activity. If clean up is unsatisfactory in the sole discretion of the Library Director or designee, the applicant will be billed for the costs of cleaning to the extent that it exceeds the \$50.00 security deposit for clean up. However, the Library reserves the right to deduct the excess cost of clean up from any other security deposit submitted by applicant, before billing applicant directly.

**I have read and understood the regulations pertaining to the Dobbs Ferry Public Library Meeting Rooms. Signing the application binds the organization and individual applicant to accept full responsibility for the requested use and to comply with all regulations governing use.**

Signature: \_\_\_\_\_

Position in Organization: \_\_\_\_\_

Date: \_\_\_\_\_

Person accepting key: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Note:** Written Library Staff approval is required before reservation is confirmed.

**PLEASE RETURN APPLICATION TO:**  
**DOBBS FERRY PUBLIC LIBRARY**  
55 MAIN STREET  
DOBBS FERRY, NY 10522  
ATT: DIRECTOR

**STAFF USE ONLY**

Application Approved (name): \_\_\_\_\_

Payment Received: Date \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Check #: \_\_\_\_\_

Name on Check: \_\_\_\_\_

Deposit Received: Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Check #: \_\_\_\_\_

Deposit Refunded: Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Check #: \_\_\_\_\_

Piano Rental: \$20.00 date paid: \_\_\_\_\_ Key returned: date \_\_\_\_\_

Comments: \_\_\_\_\_