



Chandler Public Library

MEETING ROOM APPLICATION

Downtown Sunset Hamilton Basha

Date of Application: _____ Date of Event: _____

Time (beginning and ending time, including set-up & clean-up): _____ to _____

Name of organization: _____

Person Responsible: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Home): _____ (Work): _____

Responsible party in attendance during the meeting: _____ Phone: _____

General Description of Event: _____

Expected Attendance: _____

NOTE: This room is an official meeting room for the City of Chandler. In the event that it becomes necessary to use the room for a federal, state, or city function, your agreement will be released. You will be notified as soon as possible should this occur.

The responsible party listed in the application shall insure that no damage is sustained to buildings, furnishings, fixtures or equipment during use of the facility. The applicant will be charged for any cleaning required or damage incurred during use of the facility.

I understand that the room must be returned to original set-up and clean. Applicant agrees to vacate 15 minutes prior to closing time.

You will be notified if your meeting room application is approved.

If you have reserved the Council Chambers at the Downtown Library, please check in and out at the 2nd Floor Youth Reference Desk.

Signature: _____ Date: _____

Approved by: _____ Date: _____

Downtown Library
Phone: 480-782-2809
Fax: 480-782-2823

Sunset Library
Phone: 480-782-2840
Fax: 480-782-2848

Hamilton Library
Phone: 480-782-2828
Fax: 480-782-2833

Basha Library
Phone: 480-782-2850
Fax: 480-782-2855