

TOWN HALL LIBRARY

N76 W31429 County Hwy. V V
North Lake, WI 53064
(262) 966-2933
townhalllibrary.org

Application to Use McBroom Community Room

Applications must be submitted at least 7 days prior but no earlier than 2 months.

When not needed for library activities, the Community Room is available for use by Waukesha County non-profit organizations during the hours that the library is open, Monday-Saturday. Please allow time for set-up and clean-up in addition to the program time. The room must be vacated fifteen minutes before the library closes. Please do not notify the members of your group or consider the room booked until you have received confirmation.

Date of meeting: _____ Time Requested: _____ to _____ (Include set-up and clean-up time)

Full Name of Organization: _____
(NO abbreviations, please)

Purpose of your meeting: _____

Estimated attendance: _____ (Room capacity of 48 persons)

Do you plan to serve food/beverages? _____ No _____ Yes (see policy regulations)

Contact Person: _____ Phone: Business : _____ Home/cell: _____

Address: _____ City/Zip: _____

Email Address: _____ FAX: _____

The undersigned, on behalf of the above named organization, hereby indicates that he/she read and agrees to comply with the policy and procedures governing the use of the library community room. The undersigned agrees to indemnify and hold harmless the Town Hall Library from any and all actions or suits relating to its use of such rooms and facilities. Further, the undersigned agrees to reimburse the Town Hall Library for any and all costs for repair of any and all damage as may be caused directly or indirectly to the room and/or facilities by such use thereof.

Signature of Applicant Date Taken by: _____
Library Staff signature

ALL APPLICATIONS WILL BE REVIEWED BEFORE FINAL APPROVAL
Pre approval is available at time of application if previously approved user.
PLEASE DO NOT ADVERTISE YOUR MEETING UNTIL YOU RECEIVE FINAL APPROVAL.

How would you like to be notified of your room confirmation? (check one):

_____ Mail _____ EMail _____ FAX _____ Phone

For Library Use Only

Approved _____ Not Approved _____ Approval sent by/Date _____

Event added to MAIN calendar _____ Equipment needed and verified _____