

**EDISON TOWNSHIP FREE PUBLIC LIBRARY  
APPLICATION FOR USE OF MEETING ROOM**

Complete and return to: Edison Township Public Library  
340 Plainfield Avenue  
Edison, New Jersey 08817

MEETING ROOMS SHALL NOT BE RESERVED WITHOUT A COMPLETED APPLICATION.

Branch location: \_\_\_\_\_ Date of application: \_\_\_\_\_

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

Applicant's address: \_\_\_\_\_  
\_\_\_\_\_

Name of organization requesting use: \_\_\_\_\_ Phone: \_\_\_\_\_

- Non-profit
- Profit
- Children's/Senior citizen group

Meeting date(s) requested (give actual dates): \_\_\_\_\_

Estimated attendance: \_\_\_\_\_ Meeting time: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm

Type of meeting (film/lecture/discussion, etc.): \_\_\_\_\_

Attached to this application is an Insurance and Liability clause, which clause is hereby incorporated by reference herein and made part of this application.

APPLICANT HAS READ AND UNDERSTANDS THE LIBRARY'S MEETING ROOM POLICY AND REGULATIONS AND ACCEPTS FULL RESPONSIBILITY FOR COMPLIANCE WITH ALL PROVISIONS SET FORTH HEREIN.

\_\_\_\_\_  
Signature of representative or adult sponsor of applicant

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FOR LIBRARY USE:

Application approved: \_\_\_\_\_  
(Date)

Fee: \_\_\_\_\_

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

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

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Signed: \_\_\_\_\_  
Judith Mansbach, Library Director