⧨ East Lansing Public Library
Meeting Room Request Form

Date of Meeting _____   **Group Name** _____

Purpose of Meeting/Event _____

Contact _____**Contact Phone** _____

Time Reserved From _____ to_____ (includes setup/clean up)

Meeting Time From _____ to_____

Group Type (Circle): Resident/Non-Profit or Non-Resident/For-Profit or COEL

Size of Room Needed Whole Room ـــــــ   Kitchen Half Room ـــــــ   Screen Half Room ـــــــ

Anticipated Attendance _____
Please note: library parking is limited and other parking arrangements may be necessary.

Fees: Two-hour minimum usage is required, one-hour increments only thereafter. If event runs beyond the scheduled time, groups will be charged for the additional hour(s). Additional time may not be available based upon the meeting room schedule.

	Resident/Non-Profit Organization	Non-Resident/For-Profit Organization
Whole Room	$40 for 2 hours, each additional hour $10	$50 for 2 hours, each additional hour $15
Half Room	$30 for 2 hours, each additional hour $5	$40 for 2 hours, each additional hour $7

Below is a list of available equipment in the meeting room. For * items**,** the screen side or the whole meeting room must be reserved.   Coffee and tea supplies are not provided by the library.

Hot water percolator	Podium	Microphone*
Coffee percolator	Projector/Screen*	DVD player*

Technology Support: Groups must provide a qualified operator for any equipment used.
The library can only provide limited technology support at any time. Please ask at the Reference Desk for assistance during your event.

Submit application with payment to ELPL Attn: Meeting Room Coordinator; 950 Abbot Rd;
East Lansing, MI 48823; fax: (517) 351-9536. Meeting Room policy is available at elpl.org.
Additional questions? Call 351-2420 and ask for the Meeting Room Coordinator.

Please provide a sketch of how the room is to be set up with tables and chairs in box below.
For example: U-shaped, classroom, theater style, etc. Please be specific in your diagram for accurate set-up.

Kitchen   Screen

Note: Library staff cannot guarantee that the room will be set up exactly as requested. In case the room is set up incorrectly, staff is not available to alter room arrangements for evening and weekend meetings.

Additional Notes/Information _____

_____

_____

_____

_____

I have read and agree to the meeting room policy. I understand that I must report to the Circulation desk before and after my meeting. I understand that I am responsible for the room and its contents.

Print Name: _____   **Date:** _____

Signature: _____

For Office Use Only
Payment info: Check __ Cash __ CC __   **Amount Due:** _____

Payment Received   **Date:** _____   **By:** _____

Name on Credit Card: _____ **Expiration Date:** _____

Credit card number: _____ **Security Code:** _____