



ROCKVILLE CENTRE PUBLIC LIBRARY
221 North Village Avenue, Rockville Centre, NY 11570
516-766-6257 • rvclibrary.org • Catherine Overton, Director

MEETING ROOM APPLICATION

1) ORGANIZATION INFORMATION:		2) APPLICANT INFORMATION:	
NAME OF ORGANIZATION		NAME	
ADDRESS		ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TELEPHONE		TELEPHONE HOME	CELL
WEBPAGE OR FACEBOOK PAGE		EMAIL ADDRESS:	
3) MEETING INFORMATION:			
DATE OF MEETING	TIME MEETING BEGINS AND ENDS	ANTICIPATED NUMBER IN AUDIENCE	DATE OF APPLICATION
SUBJECT OR PURPOSE OF MEETING			
<p>➤ It is agreed that the Rockville Centre Public Library assumes no responsibility whatever for any property placed in the Library in connection with the program and that the Rockville Centre Public Library and the Rockville Centre Union Free School District are expressly released and discharged from any and all liability for any loss, injury or damage sustained to persons and property during or by reason of any program held on the Library's premises.</p> <p>➤ It is agreed that the applicant will ensure observation of the REGULATIONS GOVERNING USE OF THE MEETING ROOMS</p> <p>➤ It is agreed to submit a draft of meeting publicity prior to approval.</p>			
4) APPLICANT'S AGREEMENT:			
APPLICANT SIGNATURE		APPLICANT'S ORGANIZATIONAL TITLE	
5) FOR OFFICE USE ONLY:			
THE ABOVE APPLICATION IS:		PUBLICITY RECEIVED AND APPROVED:	
APPROVED <input type="checkbox"/> DISAPPROVED <input type="checkbox"/>		APPROVED <input type="checkbox"/> DISAPPROVED <input type="checkbox"/>	
SIGNED		TITLE	
COMMENTS			

Please drop off or email the completed application and room set-up to Joanne Blaney jblaney@rvcpl.org in Administration. All room reservations requests must be received no later than 4 weeks prior to the event.

January 2024



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MEETING ROOM SET-UP

Help us help you run a smooth program. Fill out this form in its entirety. Any questions – just ask!

Program Date(s): _____

Time: from: _____ to: _____

Program Title: _____

Contact Person: _____

Staff Contact Person: _____

Number of people expected: _____

Meeting Room:

☐ Helen Kraus Room ■ Maximum Occupancy 199

☐ Small Room ■ Maximum Occupancy 45

☐ Kim's Corner ■ Maximum Occupancy 15

☐ Group Study 2 ■ Maximum Occupancy 6

Library Use Only:

☐ Story Time Rm. ■ Maximum Occupancy 10

☐ Staff Room ■ Maximum Occupancy 15

Equipment Needed ■ *Staff must return all equipment to its proper place after the program.*

☐ Sony Projector (HK Rm. only)

☐ Blackboard

☐ Wireless Mic (HK Rm. only)

☐ Portable Sound System w/Wireless Mic

Choose one: ☐ Clip-on or ☐ Hand-held

☐ Wired Mic (HK Rm. only)

☐ Laptop (*Wireless available*)

☐ Music Stand

☐ Television/DVD Player

☐ Piano (HK Rm. only)

☐ Dry Erase Board

☐ HDMI Cable or ☐ VGA Cable

☐ Easel

☐ Lectern

☐ Coffee Urn (2 max. ■ *no supplies included*)

☐ Smart TV on cart w/ HDMI hookup and webcam

☐ Laser Remote

★ Reminder: Apple users must bring port adapters.

Choose a Room Set-up: ☐ Audience Style ■ *Chairs only.*

☐ Other Set-up ■ **Draw a diagram of exactly where you want tables, chairs & equipment.**