



Albany County Public Library

Conference Room Application – Request for Single Date

Questions? Contact Caitlin White at meetings@albanycountylibrary.org or 721-2580 x5456.

Basic Information

Name of Organization:

Name/Title of Event:

Description of Event (if applicable):

Number of people expected to attend:

Contact Person:

Email:

Phone:

Check-In Information

An ACPL library card number **OR** credit card number is required for room rental. Damages or loss of equipment will be charged to your library card, or to your credit card if no library card is available.

Please check in at the Circulation Desk to have the conference room unlocked. Arrive at least 10 minutes before your meeting to ensure adequate time for check in and set-up.

Person responsible for check in:

ACPL Card Library Number:

Credit Card Number:

Exp. Date:

CVC/CVV:

Billing Address:

State:

Zip Code:

Date of Meeting – Library staff will add an additional half hour for set-up and take down time upon receiving this form.

Date:	Time: From	a.m.	p.m.	(check one)
	To	a.m.	p.m.	(check one)

Payment (check one) – Due before the conference room is used.

Governmental (FREE for federal, state, county, city, and special districts)

University Groups (\$10 for 2 hours)

Not-for-profit (\$15 for 2 hours)

Tax-exempt number required:

Private individual, group or organization (\$30 for 2 hours)

This event is being co-sponsored by the Albany County Public Library. **No** **Yes** **(check one)**

Who was the staff representative that approved your co-sponsorship?

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Additional Comments or Questions

Meeting Room Waiver

Before reading and signing the meeting room waiver, please read the ACPL meeting room policy in its entirety, which is located at <http://www.albanycountylibrary.org/meeting-room-policy.aspx>

I, the undersigned, on behalf of the above organization, have read the entire meeting room policy. I agree to inform the participants of all regulations governing the use of these rooms, to abide by these regulations, to accept full liability for any damage to facilities or equipment while responsible for these rooms and to confine the organization's activities to the assigned room. I understand the group may be billed if the room(s) is not cleaned and returned to its original state following the meeting.

I understand that the library is not liable for any accidents, injury, or loss of property, which may occur in connection with use of the meeting rooms. I also understand that the library does not provide any liability protection for users of the meetings rooms and that users are responsible for damages to others.

I understand that, as a public institution dedicated to the free expression of and open access to ideas from all points of view, meeting rooms and exhibit space in the Albany County Public Library are available on equal terms for the lawful activities of all groups, regardless of their beliefs or affiliations. Permission to use the library facilities does not constitute an endorsement by the library staff, board or the county, of the groups of its beliefs.

I understand that my room reservation is not a firm commitment until this form is signed and am aware that the room rental may require a fee from the organization.

Printed Name:

Signature:

Date: