

# Application for Meeting Room Use

REDWOOD CITY PUBLIC LIBRARY | redwoodcity.org/library | 650.780.7020



Please complete this application and return it to: **Library Administration, RESERVATIONS, 1044 Middlefield Road, Redwood City, CA 94063**, or fax to (650) 780-7069. Signed and scanned applications can be sent electronically to [sgini@redwoodcity.org](mailto:sgini@redwoodcity.org). If the application is incomplete or illegible, it will be returned to you unapproved. All reservations made in advance of application approval are tentative only. We must have an approved application on file before we can finalize a reservation. Applications must be submitted no more than seven days following telephone reservation or the reservation will be cancelled.

Applicant's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Name of Organization \_\_\_\_\_

Subject or Purpose of Meeting \_\_\_\_\_ Estimated Attendance \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Library Card Number \_\_\_\_\_ E-mail Address \_\_\_\_\_  
(Required)

## ROOM(S) REQUESTED: (See Meeting Room Policy for room descriptions)

### DOWNTOWN LIBRARY - 1044 MIDDLEFIELD ROAD (See Meeting Room Policy for room descriptions)

Nonprofit groups may book 2 rentals per calendar month at no charge. Additional bookings by nonprofits will be charged 50% of the standard room rates. All other groups require a fee (see Meeting Room Policy for fee schedule).

Community Room     Small Conference Room

Date: \_\_\_\_\_ Event time (includes set-up and clean up) \_\_\_\_\_ to \_\_\_\_\_ = \_\_\_\_ hrs

Total Hours \_\_\_\_\_ hrs @ \$/hr \_\_\_\_\_ = Rental fee    Total Rental Fees \$ \_\_\_\_\_ OR  Nonprofit

### REDWOOD SHORES LIBRARY - 399 MARINE PARKWAY (See Meeting Room Policy for room descriptions)

Effective January 1, 2018, nonprofit groups may book 2 rentals per calendar month at no charge. Additional bookings by nonprofits will be charged 50% of the standard room rates. All other groups require a fee (see Meeting Room Policy for fee schedule).

Community Room     Meeting Room A     Meeting Room B     Meeting Rooms A & B     Meeting Room D

Date: \_\_\_\_\_ Event time (includes set-up and clean up) \_\_\_\_\_ to \_\_\_\_\_ = \_\_\_\_ hrs

Total Hours \_\_\_\_\_ hrs @ \$/hr \_\_\_\_\_ = Rental fee    Total Rental Fees \$ \_\_\_\_\_ OR  Nonprofit

EQUIPMENT NEEDED: (Community Room Only):     TV/DVD

The applicant hereby agrees to hold the City of Redwood City, its City Council, Library Board, the individual members thereof, and all officers, agents and employees free and harmless from any loss, damage, liability, and cost of defense that may arise in any way by such use or occupancy of library facilities. I hereby certify that I have read the Meeting Room Policies and procedures and I realize that the Redwood City Public Library reserves the right to deny any application or to revoke permission previously granted. It is my responsibility to notify the library of any cancellations on my part. I, the undersigned, hereby certify that I will be personally responsible on behalf of the organization for any damages sustained by the library's buildings, furnishings or equipment through the occupancy, or use of said facilities by the applicant.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

For staff use only: Approved: \_\_\_\_\_ Date Approved: \_\_\_\_\_  Paid in Full     Exempt

## PAYMENT INFORMATION (NON-REFUNDABLE) - MASTERCARD & VISA ONLY

Name on Card \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_