



FORT BEND COUNTY LIBRARIES

Sienna Branch Library

Ph: 281-238-2900 • Fax: 281-238-2901

EMAIL: snpublic@fortbend.lib.tx.us

Today's date _____

APPLICATION FOR USE OF MEETING ROOM

1. Name of organization _____

2. The undersigned representative of the organization agrees that this meeting will be held in accordance with the regulations set up by Commissioners Court concerning the use of the library's meeting room. Any charges incurred will be billed to this person. The person responsible for making a meeting room application will be considered the official contact person for the group.

Name _____

Title in organization _____

Address _____

Telephone number _____

Email _____

Meeting Topic _____

3. Rooms, furniture and equipment available at Sienna Branch Library -- check reserved room.

Meeting Room (you set up/take down)

___ chairs (up to 130)

___ tables 30 x 72

___ tables 24 x 72

___ whiteboard

___ lectern

Multipurpose Room (you set up/take down)

___ chairs (up to 35)

___ tables 30 x 72

___ tables 24 x 72

___ whiteboard

___ lectern

Conference Room 1 (permanent set-up) - 1 table, 10 chairs, whiteboard

Conference Room 2A (permanent set-up) - 6 tables, 16 chairs, whiteboard

Conference Room 2B (permanent set-up) - 2 tables, 8 chairs, whiteboard

(Portable AV set-up available for two smaller conference rooms)

Reserve audiovisual equipment and/or laptop computer on separate form.

4. Meeting DATE _____

5. ACTUAL TIME of meeting _____ to _____

6. SET-UP TIME _____ to _____

7. Approximate NUMBER EXPECTED _____

Signature _____

FOR STAFF USE

Date Rec'd ___ Time Rec'd ___ Rec'd By ___ Date Group Notified ___ AV Requested Y N

Date Approved ___ Staff Initials ___ Not Approved ___

Branch Manager Signature _____ Date _____